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MONOMANIA: THE LIFE AND DEATH OF A PSYCHIATRIC IDEA IN NINETEENTH- CENTURY FICTION 1836-1860

A thesis submitted in partial fulfilment of the requirements for the degree of
Doctor of Philosophy

by Lindsey Stewart

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Abstract

This thesis is about the nineteenth-century psychiatric idea, monomania, in medical, literary and popular discourse from 1836-1860. I examine patient case-notes from the Bethlem, York Retreat and Surrey County Pauper Asylum to establish that the experiential or ‘real’ narratives of monomaniacs confirm the category’s initial confusion with melancholia, and then its conflation with social commentary. Used sparingly in clinical practice, physicians account for a range of anti-social behaviour with its deployment as a diagnosis. However, I argue that it is in the literature of the day that the idea is most widely celebrated. Demonstrating its variant, unstable meanings, the texts I read use monomania explicitly. They include works by the Brontë sisters, Elizabeth Gaskell and George Eliot, neglected thriller pieces by Dinah Craik, the pseudonymous ‘Thomas Waters’, and an anonymously authored story from *The Ladies’ Cabinet of Fashion, Music and Romance*. These works all pre-date monomania’s more well-known later incarnations by Wilkie Collins and Charles Reade.

I argue that the idea’s popularisation followed a temporal arc which had three phases: in its rising phase (up to the McNaughtan trial in 1843) it generally referred to a pathological excess of passion, at its peak it was inflected with ideas of moral decrepitude, criminality and incarcerable insanity, and its demise saw it coupled with notions of monstrosity and an inverse, mechanistic lack of emotionality. I examine its parallel literary utilisation in constructing ideas of disproportion and transgression in relation to the emotions, as well as the construction of pathogenic environments (notably in *Mary Barton* (1848)) which gave rise to what the Victorians styled as ‘diseases of the mind’. In Charlotte Brontë’s *Villette* (1853) and George Eliot’s *The Mill on the Floss* (1860), the condition was reprised to evoke both period detail and the self-disciplining agendas of their heroines. A novelistic ‘diagnosis’ of monomania is a point of crisis in these texts, drawing attention to attempts to silence ‘extravagant’ emotion. In its second phase, I contend that its courtroom utility associates literary monomania with masculine, controlling behaviours. Periodical stories use it to signal topicality and educate readers on this new ‘contagion’, modifying the disease’s symptoms to suit their readerships. Unlike the pre-nineteenth-century trope of melancholy as a too-feeling subjectivity (which is still in evidence in the Brontë sisters’ novels), this ‘second-phase’ monomania suggests that too much masculine feeling might quickly disrupt the domestic space. The idea’s afterlife as a form of degenerative criminality, can be traced through to stories such as Arthur Conan Doyle’s *The Adventure of the Six Napoleons* (1904) in which the villain’s alleged monomania co-exists with abnormal simian agility and an outsized jaw.

For Duncan, Olly and Alex

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Introduction

A young female, with no apparent physical disease, without any known cause, becomes sad and thoughtful. The countenance assumes a pale hue, and the eyes sink in their sockets and the tears flow involuntarily. The sufferer experiences turns of prostration, without previous exertion: groans and sighs. Nothing diverts her, or engages her attention. On the contrary, everything wearies her. She avoids relatives and friends; and neither speaks nor replies to anyone. Her appetite is feeble, and capricious. She does not sleep; or if she does, her rest is disturbed, and she becomes emaciated. Her relatives expect, by marriage, to restore her from this condition, which fills their minds with disquietude. She accepts, at first with indifference, the various proposals that are made to her. Shortly after however, she refuses them all with obstinacy. The malady continues to increase, and fever ensues. The pulse is irregular, disordered and sometimes slow. Certain convulsive movements are observed, some thoughts irrationally expressed, and particularly certain strange actions. She finally sinks into marasmus, and dies. Death revealed the secret. Diffidence, and imperfect religious education, and the fear of displeasing her relatives, have determined her to conceal the emotions of her heart, and the true cause of her malady.¹

Jean Etienne-Dominique Esquirol *Des Mental Maladies* (1838)

This micro-story of heartbreak describes a case of *monomanie érotique*. Its emphasis on the body and the symptoms of disease suggest its context of medical instruction, but its provocative allusions to a ‘secret’ and the patient’s efforts to ‘conceal the emotions of her heart’ betray a literary bent. It seems to offer a Victorian novel in miniature: concealment, crisis, resolution. Both structurally, as here, and via more explicit textual and conceptual references, it is well established that the narratives of early psychiatry and psychology, and those of nineteenth-century fiction, were full of dynamic intertextual traffic.² However I begin with this case-study because it illustrates something else. In its attempt to stamp a disease category with scientific meaning this early psychiatric tract achieves the opposite. Using this text as a model for

¹ E. Esquirol, *Mental Maladies: A Treatise on Insanity* (1838), trans. by E. K. Hunt (Philadelphia: Lea and Blanchard, 1845), p. 339.

² Key to this establishment are: Sally Shuttleworth, *George Eliot and Nineteenth-Century Science: The Make-Believe of a Beginning* (Cambridge: Cambridge University Press, 1984); Sally Shuttleworth, *Charlotte Brontë and Victorian Psychology* (Cambridge: Cambridge University Press, 1996); Helen Small, *Love’s Madness: Medicine, the Novel, and Female Insanity, 1800-1865* (Oxford: Oxford University Press, 1996); Jane Wood, *Passion and Pathology in Victorian Fiction* (Oxford: Oxford University Press, 2001); Beth Torgerson, *Reading the Brontë Body: Disease, Desire, and the Constraints of Culture* (Basingstoke: Palgrave MacMillan, 2005).

diagnosis, the clipped but rather generalised prose would be hard to apply with any clinical accuracy. The semiology of pathological affectivity here is a mix of value-judgement (her ‘obstinacy’) and the involuntary signs of common sadness (tears, sleeplessness and poor appetite), illustrating what historian of psychopathology, German E. Berrios, calls ‘the conceptual unmanageability of most forms of affective behaviour’.³ Medicine would surely require a more systematic method. But unlike medicine, the blurring of emotion with the hyperbole of illness to suggest the former’s intensity, had long since found a niche in stories. Johann Wolfgang von Goethe’s popular epistolary novella of extreme passion and suicide, *The Sorrows of Young Werther*, published in England in 1779, had lent a fashionable air to self-destruction and madness. Now with an omniscient access to the cognitive manoeuvrings of the ‘mad’, nineteenth-century fiction offered its own unique perspectives on this enduring phenomenon and it is here that monomania was truly naturalised.

In this thesis I explore the scope of monomania’s discursive meanings, how they changed and why they mattered. To refine mania into an excessive preoccupation with one idea, thing or emotion, the onset of which might be sudden, gradual or transitory, was both intrinsically optimistic (ostensibly suggesting a neatly localised, curable problem) and widely applicable. The word migrated across the Channel in the ink of court reports and was quickly assimilated into English newspaper print as cheap and ready copy. But how useful was the term monomania to the lived experience of patients and clinicians in the asylum? And once it had escaped into popular writings and fiction did their different environments initiate its decay or its refashioning? In short, was it always a literary (rather than medical) idea in its essence? And did literary works show the pathogenic environments which might give rise to such an ostensibly localised brain disease? I shall argue that its associations were mutable and its general popularisation followed a temporal arc which had three phases: in its rising phase it referred most commonly to a pathological excess of passion, at its peak around 1855 it was inflected with ideas of moral decrepitude and domestic criminality, and its demise saw it coupled with notions of monstrosity and an inverse, mechanistic lack of emotionality. I shall explore how the idea was situated in relation to the twin Victorian tenets of self-control and self-help, arguing that in imaginative literature it was both used and exposed as a device to corral culturally contingent emotion.

The beginning of this arc is clear. In the early 1810s ‘*monomanie*’ was coined by Jean Etienne-Dominique Esquirol (1772-1840) in the specialized context of the clinic but rapidly became common in wider areas of thought and description. An abstract noun which formed

³ G. E. Berrios, ‘The psychopathology of affectivity: conceptual and historical aspects’, *Psychological Medicine*, 15 (1985), 745-758, p. 745.

part of ‘the *sine qua non* ... of clinical observation’, it was part of a new ‘scientific’ vocabulary, but was also paradoxically resistant to any scientific measurement and validation itself.⁴ It referred to a partial insanity in one of the compartmentalised faculties of intellect, will and the passions, typified by either an unsoundness of mind on one idea, an aberrational impulse, or an excess of one of the passions. I have constructed a pair of N-grams of digitised texts held by Google books (shown below) which give an impression of the word’s trajectory and naturalisation in French (table 1) and English (table 2).

TABLE 1: N-GRAM SHOWING THE FREQUENCY OF 'MONOMANIE' IN FRENCH TEXTS



TABLE 2: N-GRAM SHOWING THE FREQUENCY OF 'MONOMANIA' IN ENGLISH TEXTS



⁴ Richard Hunter and Ada Malcalpine, *Three Hundred Years of Psychiatry, 1535-1860: A History Presented in Selected English Texts* (Oxford: Oxford University Press, 1963).

In the political climate of 1820s France the time was propitious for the emergence of this new idea. A person could now be partly deranged whilst simultaneously appearing normal. Anecdote has it that Esquirol liked to display his novelist friend Honoré de Balzac together with a mentally ill patient, and ask his students which was the madman, the point being that they would not be able to discern madness without training.⁵ This ensured a growth period for the new therapeutic asylums which were ostensibly ‘moral’ (or acting literally upon the ‘morale’ in French), rather than invasive, in their treatment. Michel Foucault contends that haunted by post-Revolutionary urban discontent, here was a tool which the Restoration government could utilise, perhaps not for exclusively therapeutic purposes, but to surveil and control.⁶

Jan Goldstein’s now standard account of French psychiatry’s establishment as a medical speciality in the Bourbon Restoration in *Console and Classify* is similarly sceptical about early nineteenth century nosology. She argues that in order to bolster their claims to legitimacy, alienists (as the early French mind-doctors fashioned themselves) relied upon this new, esoteric expertise to establish and maintain their status.⁷ Esquirol’s writings gesture towards the inchoate notion of brain lesions as evidence for particular types of mental disease, and insist upon a plastic symptomatology requiring professional mediation in order to diagnose and treat diseases like monomania. This materialist view gathered pace in the nineteenth century, assured of a particular diseased space in the brain organ corresponding to a particular diseased space of consciousness. Meanwhile the French intelligentsia were quick to utilise monomania. Balzac made it a driving theme in his novels *Eugénie Grandet* (1833) and *Père Goriot* (1835), and Eugène Scribe’s one act comedy *Une monomanie* performed in Paris in 1832 used the disorder as an excuse for a character to fake their own suicide.⁸ Whilst Goldstein points out that Esquirol had emphasised the ‘peculiar porousness of monomania to

⁵ Sebastian Dieguez, ‘Balzac’s *Louis Lambert*: Schizophrenia before Kraepelin and Bleuer’, in *Literary Medicine: Brain Disease and Doctors in Novels, Theater, and Film*, Front Neurol Neurosci. Series, 31, ed. by J. Bogousslavsky and S. Dieguez (Basel: Karger, 2013) 10-34, p. 24. Dieguez also notes that Esquirol is included as a ‘real’ character in *Louis Lambert* (1832) when Lambert is brought before him and declared ‘incurable’.

⁶ Michel Foucault, *Psychiatric Power: Lectures at the Collège de France 1973-1974*, ed. by Jacques Lagrange (2003; rep. Basingstoke: Palgrave MacMillan, 2008), p. 128. As part of the *regard médicale*, Foucault argues that nosological terms might contribute to an overall impression and imposition of power in the mighty figure of the Doctor but that they had nothing to do with the prescription of disease specific treatments, or the distribution of intra-asylum space. The more significant discriminator against patients, he argues, was in fact the patient’s suitability for work.

⁷ Jan Goldstein, *Console and Classify: The French Psychiatric Profession in the Nineteenth Century*, (Cambridge: Cambridge University Press, 1987). Although initially suspicious about Foucault’s ontology of madness (that is, ‘madness’ does not exist and unreason is effectively silenced) Goldstein argued in a new afterword to the 2001 edition of *Console and Classify* that her work has relevance for both contemporary American Psychiatry and interpretations of Foucault’s theories. She drew a parallel between monomania and A.D.D. (Attention Deficit Disorder) arguing that these are categories driven by the profession and reliant on public confidence, and are not the product of hard science.

⁸ Eugène Scribe, *Une monomanie, a comedy in one act* in *Oeuvres complètes* (Paris: E. Dentu, 1876-85), v.24.

cultural values and cultural changes', I would argue that not only were its symptoms culturally inflected but it also existed more or less solely as a cultural idea.⁹

Whilst these efforts to organise psychiatry towards academic and professional credibility on both sides of the Channel continued apace, attempts to assert ownership of monomania as part of a coherent medical narrative, were too late in England. This thesis argues that, contrary to the 'one culture' argument of Elaine Showalter's classic text *The Female Malady* in which there was an almost seamless transition in monomania's meaning from medical to popular narratives, at root always metaphorically associating the condition with the feminine, it was actually a raucously unstable term.¹⁰ In what Showalter memorably calls 'the global headquarters of insanity,' the English made the term their own.¹¹ Beset by an unruly popular discourse it metamorphosed into a plethora of wildly diverging 'diagnoses' which flagged up a range of 'unhealthy' obsessions, often looking into their causes as well as their consequences. Once the exclusive domain of the priest or doctor, the health of the psyche became a talking point for all and, on the back of a proliferating print culture, the diagnosis of monomania at its apogee enabled a new generation of armchair clinicians.

Although informed by the history of psychopathology and psychiatry, the ontology of mental illness is beyond the scope of this thesis. Methodologically, I am considering the value, meaning and impact of a word. Raymond Williams calls this method 'historical semantics' in *Keywords* in which he describes the complexity of a word's references and gives an account of their historical formation.¹² The framework for Williams's own inquiries was general, but the method was, as he put it, 'in detail... the study of actual individual statements and contributions'.¹³ It has been the appearance of the word alone which has guided my research and while this has sometimes begun with fragments, I have worked to show the outward ripples the idea has upon the construction of subjectivity in the nineteenth century novels in which it appears. Although digital retrieval discloses a mass of textual usage, which, for example, illuminates monomania's first peak of usage in 1843, the data does not immediately tell us the resultant inflexions in meaning. In an effort to address this I have considered the co-locations of words (the most productive of which has been 'horror') but these are necessarily selective and tend not to indicate broad trends. This thesis therefore sets out to analyse those temporal patterns indicated by the data via close readings of the fiction. Whilst Victorian periodicals were running news articles and miscellaneous pieces on monomania it

⁹ Goldstein, p. 158.

¹⁰ Elaine Showalter, *The Female Malady: Women, Madness, and English Culture 1830-1980* (London: Virago Press, 1985).

¹¹ Showalter, p. 7.

¹² Raymond Williams, *Keywords: A vocabulary of culture and society*, (1976: rep. London: HarperCollins, 1988) p. 23.

¹³ Raymond Williams, *Culture and Society 1780-1950* (1958; rep. Harmondsworth: Penguin, 1961), p. 17.

was in the neighbouring, privileged sites of fiction that psychiatry's new idea was most extensively tested.

Williams also points out the pitfalls of this type of project. The confident use of a word, he notes, can sometimes be difficult to question. Words, 'in the right circles, seem mere transparencies, their correct use a matter only of education'.¹⁴ This is particularly so with a psychiatric idea originating from a bewildering nosology, and then subsequently embedded in other equally perplexing taxonomies of mental disease which typically adopt an assured, grandiloquent tone. In essence and in practice monomania was a metaphysical idea, and one which proved to be irresistibly chameleonic. This was compounded by its apparent incurability. When a disease is incurable, Susan Sontag writes, it is, by definition 'mysterious', a magnet for metaphor, and: '...it is diseases thought to be multi-determined that have the widest possibilities as metaphors for what is felt to be socially or morally wrong'.¹⁵ Whilst Sontag's seminal essay discussed the metaphors which circulated around nineteenth-century tuberculosis, a disease also couched in the language of passionate extremes, monomania's metaphors were even more inexhaustible, having no material anchor and therefore no possibility of eradication via medical 'cure'.

1.1. Origins

The *OED* records two definitions of monomania:

Monomania [a. mod L. *monomania*, f. Gr. *μόνο-* MONO- + *μανία* MANIA; after F. *monomanie* (Esquirol). A form of insanity in which the patient is irrational on one subject only. b. *transf.* in popular use: An exaggerated enthusiasm for or devotion to one subject: a craze (*for*).

An example from James Cowles Prichard's entry in the monthly medical journal *Cyclopaedia of Practical Medicine* (1833) is given for the first: 'The term monomania, meaning madness affecting one train of thought has generally been adopted in late times instead of melancholia', and to illustrate its second, 'popular' usage an excerpt from *David Copperfield* (1849) spoken by the 'Old Soldier' about her obsession with an inheritance is given: 'I call it quite my monomania, it is such a subject of mine'. These definitions share the characteristic focus of 'one subject' however; in the first definition this is an 'insanity' but in the second, a 'craze'. The point of cross-over is opaque.

¹⁴ Williams, *Keywords*, p. 16.

¹⁵ Susan Sontag, *Illness as Metaphor* (1979: London: Penguin, 1991), p.5, 62.

As Raymond de Saussure points out in his introduction to the 1966 reprint of *Mental Maladies* the practice of classifying disease according to families, types and species had its roots in the system of classifying animals and plants delivered by Carl von Linné (1707-1778). Linné used a binomial nomenclature, or names composed of two parts: genus and species which were usually given in Latin (for example homo-sapien). Following this pattern, medicine identified types of disease with ‘fixed and immutable characteristics’.¹⁶ And rigid classifications for mental diseases would require similarly distinguishing features. Esquirol thought of the idea in 1810 and opted for a binomial name.¹⁷ The choice of the prefix *mono* whose combining form means ‘one’ or ‘single’ and the noun for madness *mania*, offered for many, a ready definition of sorts. The first printed definition of the disease in in the *Dictionnaire des Médecine* (1814), is illustratively problematic, defining the word as ‘*une seule folie*’ but suggesting its interchangeability with melancholy.¹⁸ In fact this was more appropriate for Esquirol’s other neologism, lypemania, which he defined as ‘a partial delirium attended by a sad or depressing passion’ as opposed to the exalted or excited disposition of the monomaniac. The diseases of monomania and lypemania were to replace ‘melancholy’ which Esquirol outlined in the following description:

Writers, since the time of Hippocrates, have denominated that form of delirium which is characterised by moroseness, fear, and prolonged sadness, Melancholy. The appellation, melancholy, has been given to this variety of insanity, according to Galen, because the depressing moral affections depend upon a depraved condition of the bile, which, having become black, obscures the animal spirits and produces delirium. Some moderns have given a more extended signification to the word melancholy, and have called melancholic, every form of partial delirium, when chronic, and unattended by fever [...] This double consideration, has caused me to propose the word monomania [...] a term which expresses the essential character of that form of insanity, in which the delirium is partial, permanent, gay or sad. This general received definition is now adopted by the greater number of physicians [...] The word melancholy, employed in the language of common life to express the habitual state of sadness from which some people suffer, should be left

¹⁶ Raymond de Saussure, Introduction to J.E.D. Esquirol, *A Treatise on Insanity* (1845; rep New York: Hafner Publishing, 1965), i.

¹⁷ See Goldstein, p. 153 fn. 6 which reads: ‘The only indication of the date of origin is given in Esquirol, ‘Note sur la monomanie-homicide,’ in J. C. Hoffbauer, *Médecine légale relative aux aliénés et aux sourds-muets*, trans. A. Chambeyron (Paris: J. B. Baillière, 1827), p. 311: ‘Il y a plus de quinze ans que j’ai proposé d’imposer à la folie partielle le nom de monomanie.’

¹⁸ Pierre Hubert Nysten, *Dictionnaire de Médecine et des Sciences Accessoires à la Médecine avec l’étymologie de chaque terme* (Paris: Brosson, 1814).

exclusively to moralists and poets, who, in their expressions are not obliged to employ so much precision as physicians.¹⁹

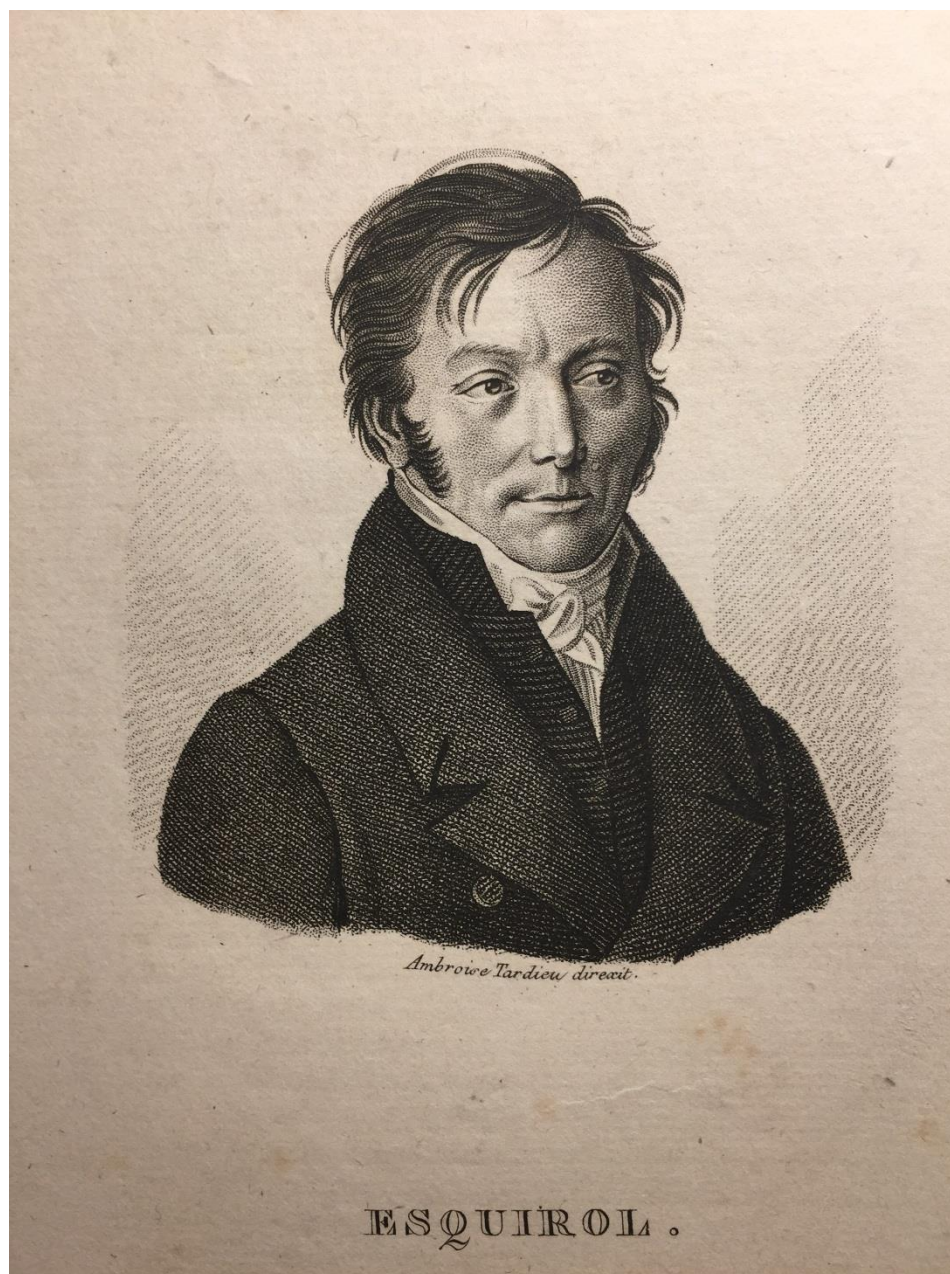
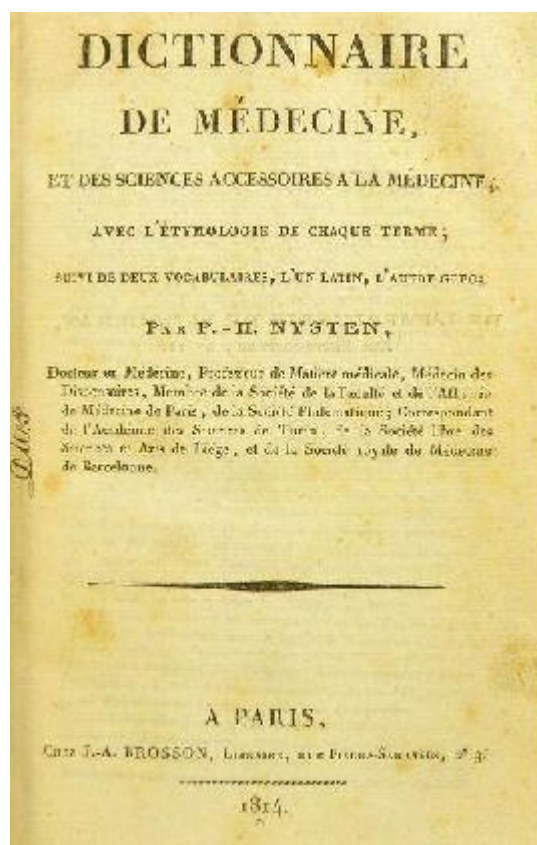


FIGURE 1: STIPPLE ENGRAVING OF ESQUIROL BY AMBROISE TARDIEU IN *DES MENTALES MALADIES* (1838)

¹⁹ Esquirol, pp. 199-200.



MONOMANIE, s. f. *monomania*, de *μόνος*, seul, et de *μανία*, folie; c'est-

MON
à-dire *une seule folie*; folie sur un objet. On a proposé dans ces derniers temps de substituer ce nom à celui de *mélancolie*.

FIGURE II: ENTRY IN THE *DICTIONNAIRE DES MÉDECINE* (1814)

Thus monomania was heralded as the new precise term and the centuries-old use of Galen humoral ‘melancholy’ was abruptly consigned to poetry. However the synonymous ‘lypemia’ was a term which never caught on, and melancholy continued to be used in asylum case notes. The engraver, Ambroise Tardieu, who made an ‘atlas’ of twenty-seven engravings of patients to illustrate Esquirol’s book, included a woman suffering from lypemia with the classic gesture of a downcast melancholic stare (see figure iii). Monomania, however, is noticeably absent from the atlas. It is possible that monomania’s contrasting popularity was also bolstered by Esquirol’s more detailed subdivision of the condition into five initial varieties: *monomanie érotique* (erotomania); *monomanie raisonnée ou sans délire* (reasoning monomania); *monomanie d’ivresse* (monomania resulting from drunkenness); *monomanie incendiaire* (incendiary monomania which Esquirol acknowledges is the same thing as the ‘pyromania’ identified by Charles Chrétien Henri Marc (1771-1840) in 1833) and *homicide* (homicidal monomania).²⁰ As an emerging profession, alienists urgently needed this suite of professional ideas in order to flourish. As Goldstein notes, Esquirol in particular was, ‘highly attentive to the role of a pristine and specialized vocabulary in establishing scientific authority’.²¹ Tellingly he may have been aware early on of the potential for legal dispute over the certification of a person’s insanity. Handwritten notes held by the Wellcome Library, made by John Nicholls Shelley (1783-1858), an English physician present at Esquirol’s lectures in July 1819, recall an ambivalent answer to a question concerning insanity and ‘the approach of death’, and by implication a patient’s testamentary capacity. His answer would be of major significance to those relatives contesting the wills of the insane for pecuniary gain: late changes to a will might be contested as the product of a monomania (as indeed they later were).²² Shelley’s hasty notes capture Esquirol’s willingness to leave this thorny area to his colleague, forensic psychiatrist, François-Emmanuel Fodéré (1764-1835).

Esquirol mentioned that it is a question has been often asked of him, whether a patient who has laboured under a long protracted mental alienation dies in that state or does he resume in any degree his mental faculty previous to the approach of death. This I conceive to be an important medico-legal question. Esquirol can only answer it by saying that he has seen patients breathe their last in a most perfect state of insanity, whilst in others death has been preceded by lucid intervals of

²⁰ E. Esquirol, *Des Maladies Mentales Considérées sous les rapports Médical, Hygénique et Médico-Légal* (Paris: J.B. Baillière, 1838) Vol II, pp. 1-130. Dr. Marc was a contemporary of Esquirol’s who developed descriptions of different forms of monomania. He is credited with coining both ‘pyromania’ and ‘kleptomania’.

²¹ Goldstein, p. 156.

²² see Sarah Wise, *Inconvenient People: Lunacy, Liberty and the Mad-Doctors in Victorian England* (London: Vintage, 2013) esp. Chapter 5: ‘If I had been poor, they would have left me alone’, which describes the case of Catherine Cumming whose relatives insisted upon her insanity in order to profit from her death.

many days ... I may here observe he frequently quotes Fodère which certainly stamps a value on his observations.²³

It was Etienne-Jean Georget (1795-1828), a student of Esquirol's at the Salpêtrière, who decisively introduced monomania into forensic psychiatry, successfully advocating it as a defence in criminal cases in two publications of 1825 and 1826.²⁴ Theodore Géricault was commissioned by Georget, to paint portraits of the insane in 1822-23. They were, according to art historian, Albert Boime, both a diagnostic instrument and, perhaps more importantly, a 'conspicuous channel of publicity' in the dissemination of the new psychopathology to the emerging professional community and public at large.²⁵ Illustrating the increasing specificity and anti-social nature of the condition, the five surviving canvasses are shown on page 18. Originally there were ten of these paintings but only five survive (held in the Louvre and museums in Lyons, Winterthur, Ghent and Springfield, USA). Sold following Georget's death in 1828 there is some speculation that they were part of a 'before' and 'after' sequence showcasing the curative powers of the asylum. However despite the respectable clothing and calm expression of the sitters, their rather downcast, distant facial expressions belie any notion of cure. It is difficult, therefore, to conclude in which sequence these paintings would belong, which in turn casts some doubt on such speculation. Nonetheless we do know that this type of promotional strategy was used by physician Alexander Morison who visited the Salpêtrière on several occasions. Commissioned sketches in his book *The Physiognomy of Mental Diseases* (1838) occasionally border on the risible depicting 'made-over' patients whose cures are signalled by combed hair and orderly dress. Sketches of 'Miss A.A.', an erotomaniac, used by Elaine Showalter in *The Female Malady*, are rightly cited as evidence of the Victorian asylum's fraught approach to women's bodies and their imposition of a narrow code of propriety.²⁶

²³ John Nicholls Shelley (1783-1858), *Notes and observations from lectures, visits to hospitals and travels* [unpublished manuscript] c. 1819. This manuscript contains notes and extracts from the lectures of leading medical men in Paris and elsewhere dated 1819/19. Shelley, an army surgeon, seems to have attended the Salpêtrière, and to have been present at the lectures of Broussais, Esquirol and others.

²⁴ E. Georget, *Examen des process criminels de Leger, Lescouffe, Feldtmann et Papavoine, dans lesquels l'alienation mentale a ete invoque comme moyen de defense; suivi de considerations, medico-legales sur la liberte morale* (Paris: Migneret, 1825); E. Georget, *Discussion medico-legale sur la folie ou alienation mentale, suivie de l'examen du process criminel. Henriette Cornier at des plusieurs autres process dans lesquels cette maladie a ete allequee comme moyen de defense* (Paris: Migneret, 1826). A complete list of Georget's works, which are in a similar vein to the two listed here, can be found in René Semelaigne's useful history of French psychiatry, *Les pionniers de la psychiatrie française avant et après Pinel* (Paris: J.B.Bailliere, 1930).

²⁵ Albert Boime, 'Portraying Monomaniacs to Service the Alienist's Monomania: Géricault and Georget', *The Oxford Art Journal*, 14: 1 (1991), 79-91, 81.

²⁶ Alexander Morison, *The Physiognomy of Mental Diseases* (London: George Odell, 1838). The accompanying text to these plates explains that the patient was a domestic servant, aged 25, whose mania 'was very soon limited to amatory ideas, and these were directed towards the clergyman of her parish' (p. 79). She is said to have been cured by 'laxatives, tartarised antimony, hyosciamus, bark and camphor', which are more likely to have played havoc with her digestive system (p. 81).

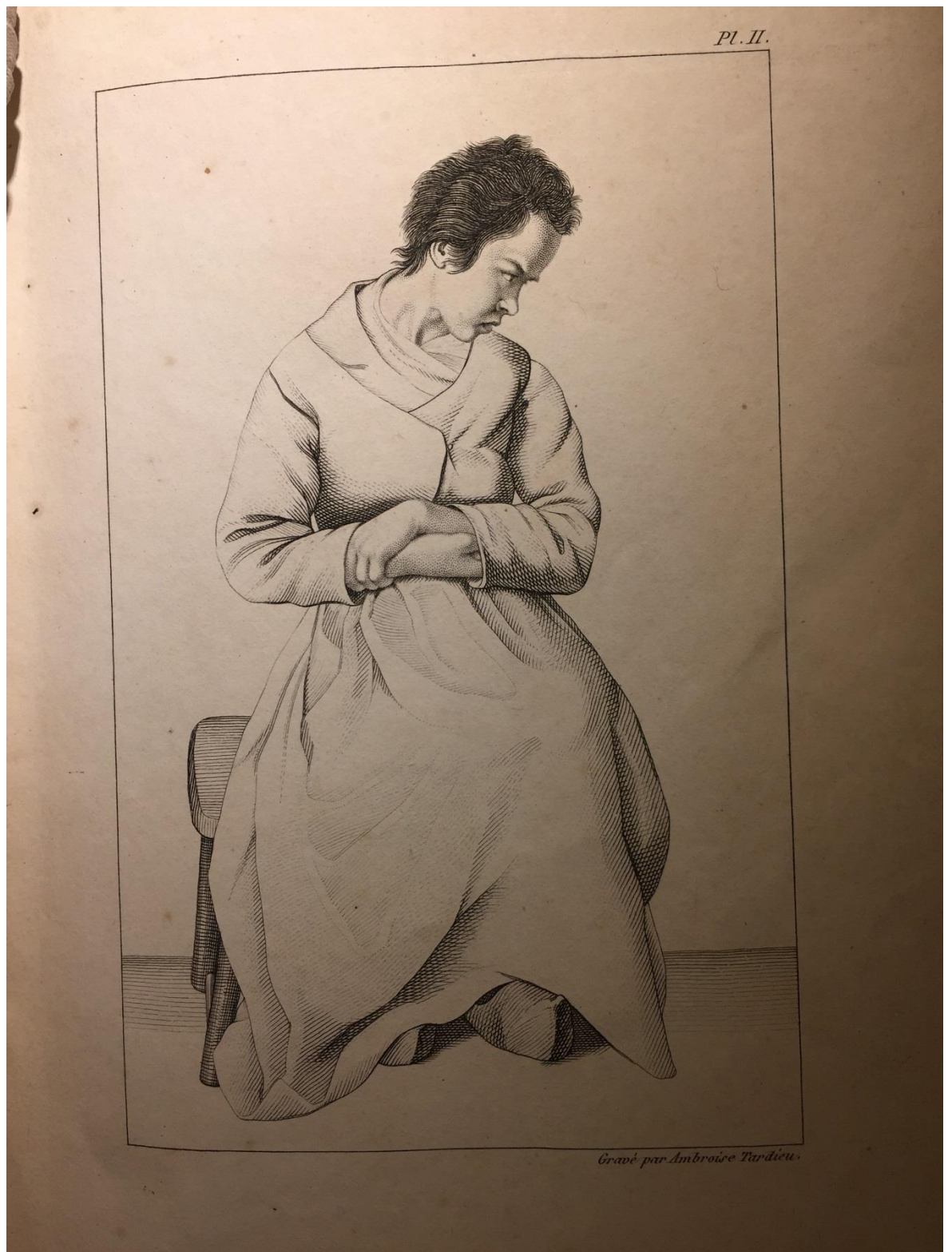


FIGURE III: AMBROISE TARDIEU, PATIENT WITH LYPEMANIA



FIGURE IV: PORTRAITS OF MONOMANIACS BY THEODORE GERICAULT 1822-23 SHOWING ACROSS FROM TOP LEFT KIDNAPPING, STEALING, GRANDEUR, GAMBLING, JEALOUSY



FIGURE V: MISS A.A. SHOWN BEFORE (ABOVE) AND AFTER (BELOW) TREATMENT IN ALEXANDER MORISON'S *THE PHYSIOGNOMY OF MENTAL DISEASES*

1.2 Monomania in the courts and the press

Williams writes in *Keywords* that significant developments of meaning, often ‘vulgar misuses’, occur in speech. In the 1820s reports in the English press, translated for cheap copy from the French assizes brought the idea of monomania across the Channel.²⁷ These included the notorious Parisian case of infanticide by Henriette Cornier in 1825 in which the deranged servant tossed her mistress’s baby’s severed head into the street, later claiming to have been possessed by the idea. These macabre stories will have no doubt been the subject of idle tittle-tattle. By the mid-1830s English writers had alighted upon the notion and *The Ladies’ Cabinet of Fashion, Music, and Romance* was the first periodical to run a three part short story on the subject, entitled simply ‘*The Monomaniac*’ (1836), for its leisured, middle-class lady readers which I discuss in Chapter Four.

The accelerating spread of monomania in the 1840s was apparently mainly due to its association in the national psyche with a new liberal approach to criminality. In 1840 an eighteen year old pot-boy called Edward Oxford attempted to shoot Queen Victoria, followed by a similar attempt in 1842 by John Francis, a cabinetmaker who took a shot at the queen while her carriage drove along the Mall. In 1843, a failed actor turned craftsman, Daniel McNaughtan, assassinated Prime Minister Peel’s private secretary Edward Drummond having possibly mistaken him for Peel given that there was no pictorial press to familiarise the public with the physical appearance of prominent figures.²⁸ During the controversial trials of Oxford and McNaughtan, a condition of monomania was successfully cited as a defence and the defendants were found not guilty by reason of insanity.²⁹ Richard Moran’s monograph on McNaughtan argues that this famous verdict de-politicised what was an act of terror, and muted any discussion of the abject social conditions fostering such murderous hatred towards the aristocracy.³⁰ Instead he was portrayed as having a monomania on the single subject of politics, thinking himself persecuted by Tory spies. No less than seven medical examiners supported this diagnosis including Edward Thomas Munro (of the Bethlem), Forbes Winslow (who later established the *Journal of Psychological Medicine and Mental Pathology* in 1848) and Alexander Morison (also at the Bethlem as a Visiting Physician). The outcome of the case meant that whether or not a person was *compos mentis* was suddenly worthy of public comment. Just as one Charles Dickens or ‘Boz’ sat listening in a packed public gallery as McNaughtan

²⁷ See Simon During, ‘The Strange Case of Monomania: Patriarchy in Literature, Murder in *Middlemarch*, Drowning in *Daniel Deronda*’, *Representations*, (1988), 86-104, p. 23.

²⁸ See Richard Moran, *Knowing Right From Wrong: The Insanity Defense of Daniel McNaughtan* (New York: The Free Press, 1981) p. 33.

²⁹ John Francis was found guilty of high treason and transported to Norfolk Island, the penal colony in Australia.

³⁰ I discuss this in detail in Chapter One: ‘A new and fierce disorder’s raging’: *Mary Barton* (1848).

was committed for trial on 1 February 1843, the highly literate are likely to have paid attention to the phenomenon of monomania via the press and periodicals.³¹ The press furore was considerable. John Cleave's (1795-1850) radical weekly *Cleave's London Satirist and Gazette of Variety* ran a cartoon entitled 'Homicidal Monomania' (shown below) which depicted a woman holding a staff and a Phrygian cap (the *bonnet rouge* of the French Revolution), allegorically representing liberty. She is shown about to be ironically assassinated by 'Bob' (Prime Minister Robert Peel), who is encouraged from behind the scenes by his mentor and roving Minister Without Portfolio, the Duke of Wellington.³² This implied that the outcry over McNaughtan's insanity defense might act as a subsequent pretext for a government clamp-down on public freedoms. Both Wellington and Peel feared the rising violence that had swept Europe, and both favoured capital punishment.

³¹ Anon., 'Final Examination and Committal of the Assassin, M'Naughten: His Extraordinary Confession', *Manchester Guardian*, 1 February, 1843, p. 8.

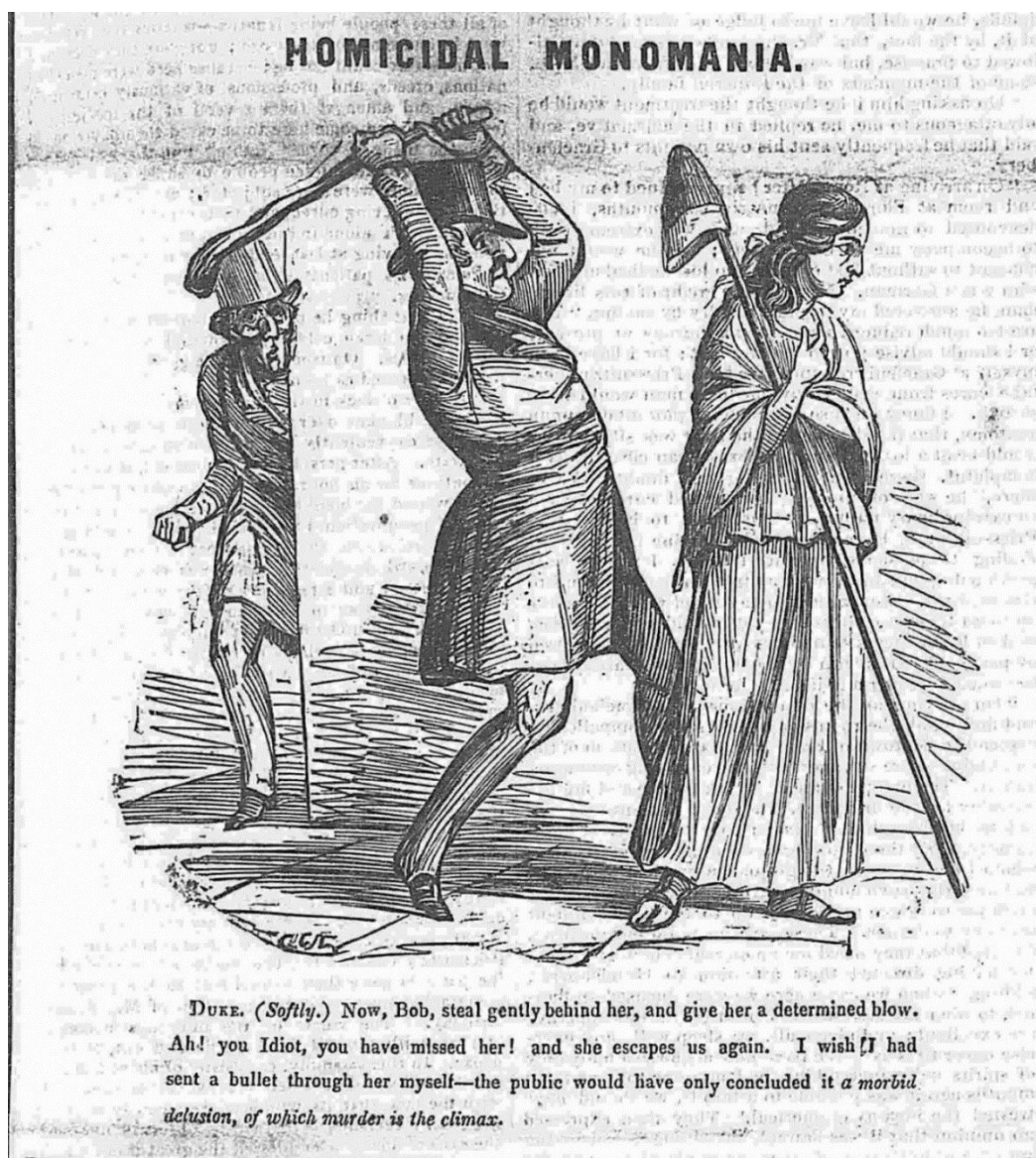


FIGURE VI: HOMICIDAL MONOMANIA, *CLEAVE'S LONDON SATIRIST AND GAZETTE OF VARIETY*, SATURDAY 25 MARCH, 1843, P.1.

Contrastingly, on Saturday 24 June, 1843 *Chambers's Edinburgh Journal* ran a front-page article entitled simply 'Monomania' which lamented the fact that the idea had become '...a jest in the mouth of the public'. With its social mission and centrist tone, *Chambers's* association with emergent middle-class values chimes with its liberal support for this new 'species of insanity' which mitigated against the harshest punishments for crime. Defensive in tone, the article continues:

But the public is unfortunately far from being well-informed on some things, and may perhaps laugh when it ought to be grave. We purposely abstained from alluding to the subject when it was ... agitated under a considerable display of public excitement, being assured that, while any such excitement existed, it would be impossible to

obtain a candid hearing for the truth. Now that calmness has been restored, we proceed to make a humble effort to explain the views at which men of science long devoted to the inquiry have arrived with regard to this species of insanity.³³

But this reverence for ‘men of science’ was atypical. In large part, the press had responded satirically to the diagnosis of monomania. Editorials in *The Times* fumed with outrage and voiced a collective impulse for retribution. Physicians, it was argued, had invaded the territory of the judiciary: ‘The judge in his treatment of the madman yields to the decision of the physician, and the physician in his treatment becomes the judge’.³⁴ *Punch*, which was the first publication to introduce its readership to satirical cartoons in 1843, enjoyed a close and friendly relationship with *The Times*. In a number of pieces the magazine echoed *The Times* line. These included the following ludicrous court report:

An unfortunate creature was brought up charged with having a mania for splitting open policemen’s skulls, without any cause whatsoever. The unhappy individual, for whom every one present felt the deepest commiseration, had broken the heads of two policemen, and threatened to do the same thing for the whole of the division to which they belonged’. A ‘medical witness’ was said to pronounce in the accused’s defence that: ‘The perceptive organs were no doubt a good deal obscured; and this, acting on the moral propensities, added to a great deal of excitement; which was probably local – considering that he came from a public-house – would in my opinion account for what has happened.’³⁵

The report ended by sarcastically noting that the courtroom listened in ‘a state of breathless suspense’ to this revered expert. Alienists thus found their hard-won standing severely tested, with the public refusing to accept ‘clinical facts’. A few weeks later the magazine ran a piece with a similar tone announcing the opening of the ‘Monomaniacs’ Academy’ (or Bethlem):

Messrs. Oxford and Macnaughten (sic) beg to announce that they have opened an Academy for the instruction of youth in the art of insanity. This very desirable and necessary acquirement will enable persons who have committed any crime or offended against the laws of their country to escape punishment. Messrs. O. and M’N. beg particularly to address persons who expect to receive legacies or reversions on the death of rich relations; as such parties will be enabled, after receiving a few lessons, to remove all impediments to their fortune. Young gentlemen who are studying the art of picking pockets will also find this a desirable addition to their education; as, should they be

³³ Anon., ‘Monomania’, *Chambers’s Edinburgh Journal*, 24 June 1843, p. 1.

³⁴ Anon., ‘The Plea of Insanity’, *The Times*, 9 March, 1843, p. 6.

³⁵ Anon., ‘Monomaniacs’, *Punch*, March 1843, p. 121.

detected, and tried at the Old Bailey, two or three lessons will teach them how to become monomaniacs pro tempore. Terms – One Guinea per lesson.³⁶

The *Morning Chronicle* offered a similarly satirical view by publishing a ‘humorous’ verse entitled ‘Congratulation on a Late Acquittal’, the opening couplet announcing: ‘Ye people of England! exult and be glad, / For ye’re now at the will of the merciless mad’. And in a related vein, ‘*Monomania*’, a full narrative length verse on the McNaughtan case by the pseudonymous ‘Dry Nurse’ was published by Saunders and Otley in a bid to cash in on public indignation. Its illustrative sixty-ninth stanza reads:

The learned doctors, Dunderhead, and Fool,
Whose judgement now-a-days is quite the fashion,
Have shewn that this poor man is but a tool
To Monomania – a novel passion –
Which *makes* men act without restraint, or rule,
Obliging them through wickedness to dash on –
Committing murders much against their will,
And positively *forcing them to kill*.³⁷

However this satire was also tinged with alarmism. The *Weekly Chronicle*, for example, argued that McNaughtan was insane and that it would therefore serve no purpose to punish him, but because the mad could not be deterred from crime the only solution was to place ‘all Monomaniacs’ under ‘immediate restraint’. Whilst this posed problems, given their apparent great number, ‘the question is, whether it is a better policy to have Queen, or a Premier, shot at occasionally, or to dispose of the parties likely to take this course, before their disorders breaks out into overt act’.³⁸ They urged Parliament to expand their powers of restraint over such persons. Meanwhile, the *Illustrated London News* suggested that the criminally insane should be banished to Norfolk Island instead of a ‘retreat of idleness’ in St. George’s-fields (where the Bethlem was then situated). This, the article insisted, might curb the desire to be ‘profitably insane’.³⁹ And indeed, in many cases the criminally insane were ‘transported’, and

³⁶ Anon., ‘Monomaniac Academy: Bethlehem Hospital’ *Punch*, March, 1843, p. 121.

³⁷ Dry Nurse, *Monomania* (London: Saunders and Otley, 1843).

³⁸ Anon., ‘Trial of McNaughtan, Monomania and Monomaniacs’, *Weekly Chronicle*, 4 March, 1843, p. 4.

³⁹ Anon., ‘Editorial’, *Illustrated London News*, 18 March 1843, p. 1.

often for staggeringly trifling offences.⁴⁰ In its turn, the *Standard*, in a trend which was to gather momentum, preferred to suggest an overt conflation of depravity and monomania, pronouncing that monomaniacs are ‘just objects of punishment, because [...] monomania is itself the effect of a long indulgence in depraved habits or action’.⁴¹

1.3 Monomaniacs in the asylum: diagnosis, admission, and seven case histories illustrating forms of deviance.

In this third section I want to consider the embodied nature of monomania in the asylum. Who were the diagnosed? What were their symptoms? How did the presence of monomaniacal bodies and the lived experience of the asylum complicate the rhetoric of Victorian mental scientists? The scientific rhetoric of monomania can be outlined via key publications, but can barely be contained such was its unruly preponderance. Firstly, Esquirol’s contributions to the sixty volumes of Panckoucke’s *Dictionnaire des sciences médicales* 1812-1822 were modified, expanded and reissued under the title *Des maladies mentales considérées sous les rapports médical, hygiénique et medico-légal* in 1838 and translated by E. K. Hunt of Hartford, Connecticut in 1845. These writings were widely read in the original French and frequently quoted, notably by James Cowles Prichard (1786-1848) in the formulation of his category of ‘moral insanity’ which more assiduously anticipated the coming theories of degeneration.⁴²

During Esquirol’s lifetime there developed much personal contact and interchange between English and French psychiatrists. Sir Alexander Morison for instance recorded in his diary visits to Esquirol at the Salpêtrière and at his private asylum in 1818. Esquirol himself visited Bethlem and St Luke’s the following year. Morison was never considered an intellectual heavyweight himself.⁴³ Initially employed at Hanwell Asylum under John Connelly, Morison also visited Esquirol to hear his ideas on insanity, physiognomy and craniology and also to see the workings of the original ‘*traitement morale*’ in which work was used as both occupation and punishment.⁴⁴ In mental science’s early professional circles he was an ardent disseminator of the monomania diagnosis, culminating in his *Outlines of Lectures on Mental Disease* (1825), the first book of its kind for medical students which was expanded in editions which punctuated the mid-century until its last run in 1856. Therein he describes monomania as precisely synonymous with ‘partial insanity’. In typically opaque fashion he argues that despite being a

⁴⁰ Bethlem manuscript casebook records for criminally insane inmates in 1845 record one instance of transportation for seven years for the ‘theft of a handkerchief’.

⁴¹ Anon., ‘Editorial’, *Standard*, March 7, 1843, p. 1.

⁴² See James Cowles Prichard, *A Treatise on Insanity and Other Disorders Affecting the Mind* (1835; rep. Philadelphia: E.L.Carey and A. Hart, 1837).

⁴³ Andrew Scull, Charlotte MacKenzie and Nicholas Herve, *Masters of Bedlam: The Transformation of the Mad-Doctoring Trade* (Princeton: Princeton University Press, 1996), p. 123. Scull cites Morison’s obituary in the *Journal of Mental Science* which ‘was damning in its faint praise’.

⁴⁴ ‘*Traitement morale*’ has different connotations in its original French compared with the later English ‘moral treatment’. In France the ‘morale’ of the individual was the concern, rather than their ‘moral’ environment.

condition which ‘there is sometimes considerable difficulty in detecting’, given that it is sometimes a transitional state prior or subsequent to mania or dementia, it is also ‘the most frequent form of the insane state’.⁴⁵ His later text *The Physiognomy of Mental Diseases* (1838) contained 108 plates of insane patients including a disparate array of monomaniacs. In it five illustrated patients are diagnosed with ‘Monomania with unnatural propensity’, the first overt pathologization of homosexuality.

In 1831 Andrew Combe (1797-1847) wrote *Observations on mental derangement: being an application of the principles of phrenology to the elucidation of the causes, symptoms, nature and treatment of insanity*. Combe, the brother of phrenologist George Combe, sought an organic cause for monomania. In this tract he argued that faculties of mind may be injured or diseased and their functions impeded or altered. Significantly, monomania or melancholia were no longer to be regarded as diagnoses ‘indicative of a specific disease’ but as names given to a ‘combination of symptoms’ denoting ‘those cases in which only one or a few of the mental powers are deranged, the others remaining entire’. The disorders of mania, monomania, melancholia and dementia may also succeed and alternate with each other. This sense of dual-diagnosis was useful and pioneering. However attempts to correlate ‘monomania’ with a physical disease in the form of an opaquely defined brain ‘lesion’ were promulgated to align alienism with what were perceived to be more credible forms of medicine, especially surgery. But this materialist assertion is a sleight of hand. Attempts to ground monomania in craniology, physiognomy or phrenology as a visible, palpable entity were scientifically weak. For example, Dr. John Epps, an enthusiastic phrenologist, reported in his paper to the Westminster Society in 1828 that erotomaniacs and nymphomaniacs were in possession of extensively diseased cerebellums, a fact he had extrapolated from the dissection of ‘several’ brains.⁴⁶

Prichard’s *A treatise on insanity and other disorders affecting the mind* (1835) had reclassified disorders of affection or feeling as moral insanity and monomania as a partial insanity in the intellectual faculty. This transition was continued by Henry Johnson (1805-1877) who proposed to replace monomania with ‘hypomania’ in *On the arrangement and nomenclature of mental disorders* (1843). He argued that monomania was not confined to one subject or series of subjects, but the insane character of mind was revealed in other instances, by the patient’s

⁴⁵ Alexander Morison, *Outlines of Mental Disease, with seventeen engravings for the use of students*, (1826: rep. Edinburgh: Maclachlan & Stewart, 1829), p. 46.

⁴⁶ ‘Westminster Medical Society, April 5, 1828’, *The Lancet 1827-1828* ed. by Thomas Wakley (London: Jowett and Mills, 1828), p.73-74. This paper was delivered just prior to the publication of John Epps, *Horae Phrenologicae: Being Three Phrenological Essays: On Morality; On the Best Means of Obtaining Happiness; On Veneration* (London: Simpkin and Marshall, 1829) which elucidates his theory of moral behaviours and the correspondingly (dis)proportionate size of various parts of the brain.

conduct and conversation. Hypomania was effectively a slighter form or lower grade of mania and began a concerted nosological attack on monomania.⁴⁷

In 1848 Forbes Benignus Winslow (1810-1874) established the *Journal of Psychological Medicine and Mental Pathology*, which ran until 1860. Berrios argues that Forbes Winslow, who owned two private asylums in Hammersmith, bridged a gap between asylum medical officers who presented themselves as ‘hands-on clinicians’ or ‘men at the coal-face’, and theoretical writers on madness or ‘metaphysicians’.⁴⁸ Keen to emphasise its practical bearing on caring for patients, Berrios contends that *The Journal of Psychological Medicine and Mental Pathology* could not be matched in its scholarly nature by the *Asylum Journal*, the official publication of the Association of Medical Officers of Hospitals and Asylums for the Insane.⁴⁹ Crucially, Forbes Winslow’s *Journal* ran a lengthy article entitled, ‘On Monomania’, in 1856, which resoundingly endorsed the disease category, arguing that, ‘partial affection may constitute a disease properly enough termed monomania, or Oligomania, which may affect exclusively the intellect, the will, the appetites, or the passions, and that such cases are frequently met with’.⁵⁰

Such was the rhetoric, but what of the patients? In order to understand the ‘real’ application of the term I examined admissions records for the Springfield Hospital, Surrey (held at the Surrey Archives); and case-notes at the Bethlem Hospital and the York Retreat (held at the Borthwick Institute) in hard-copy.⁵¹ The first two hospitals were overseen by Alexander Morison (1779-1866) as an Inspecting Physician at the Bethlem from 1835, and the Springfield, Surrey’s County Asylum, from 1841. Given Morison’s championing of the monomania diagnosis, I anticipated a higher incidence of monomania in these samples, and therefore used the York Retreat as a comparative ‘control’ sample. My searches spanned the period from 1816-1849 at the Retreat, and 1841-1860 at the Springfield and Bethlem Hospitals. The records of diagnosed monomaniacs do not present themselves in an orderly fashion. In the first instance, as they were working without a standard manual of diagnosis, Victorian physicians (although working under Morison’s direction) habitually resorted to the traditional binary of melancholia or mania in their notes. Deviation from this pattern runs against the grain, and when it does occur it is often to record dementia, hysteria or omit a diagnosis altogether before one encounters a record of monomania. Secondly, it is possible to

⁴⁷ Edward Shorter, *A Historical Dictionary of Psychiatry* (Oxford: Oxford University Press, 2005), p. 132.

⁴⁸ G.E. Berrios, ‘Forbes Winslow and his Journal’, *History of Psychiatry*, 24:4 (2013), 492-501, 493. ‘Oligomania’ is a term which emerged in Spain around the mid-1840s and is broadly synonymous with monomania although allows for more than one expression of a diseased mind. Forbes Winslow’s use of the term reflects the pan-European nature of his reading and connections.

⁴⁹ G.E. Berrios, ‘Forbes Winslow’, p. 496.

⁵⁰ Forbes Winslow, Benignus, ‘On Monomania’, *The Journal of Psychological Medicine and Mental Pathology*, 9 (October 1856), 501-521, 521.

⁵¹ The Bethlem Records were only partly digitised when my research began and I used hard-copy sources. However case notes from the Bethlem used in this Introduction can now also be accessed at: www.findmypast.co.uk/bethlem

examine the Bethlem's records 'through glass' but searches are limited to name and date to serve the ancestry market; full-text searching for a word or a diagnosis is some way off.

These three institutions differed significantly. Although the Bethlem was a charitable institution which under the later charge of Charles Hood, from 1852, had a predominantly middle-class intake, under Morison both asylums drew the majority of their clientele from London's urban poor. Patients drawn from the professional classes were rare. The numbers of male and female patients in the mid-century indicates a predominance of women of approximately 3:2 accounted for (in part) by their lower mortality rate and their slight predominance in the population at large. Criminal lunatics were overwhelmingly male. In contrast, the York Retreat was established in 1790 on a sectarian basis, admitting just a small number of patients from families who had a demonstrable link to Quakerism. Its clientele initially numbered approximately one-fifth of the size of a county asylum, which was approximately fifty patients with a similar predominance of female patients. However this changed and in 1820 high-fee paying patients from outside the Society of Friends were admitted to subsidise the higher running costs of this more intensely staffed institution. For this reason, occupations recorded in the admissions registers suggest a far greater intake from the middle class: in 1823, 69.9% of patients were drawn from either the professional, 'gentleman' class or were retailers, teachers or clerks, the remaining patients being drawn from the skilled or unskilled labouring classes. Women were defined (and included in these figures) according to the occupation of their husband or father.⁵² Treatment was overseen by the medically sceptical (and untrained) George Jepson who continued a tradition of moral treatment: that is, no restraint except the occasional use of strait-jackets, no 'medicines' and an emphasis on activity and interaction. He was succeeded by the similarly sceptical Thomas Allis in 1823, who managed the institution until 1841.

The first thing to note is that patients rarely self-diagnosed: monomania was not a fashionable disease. Unlike its forerunner melancholy, monomania was not predominant amongst those of a higher social status or those with a scholarly bent.⁵³ Despite the cultural sense of emotional over-reach common to both conditions, monomaniacs are not associated in clinical notes with a sharp intellect or insightful aesthetic knowledge. On the contrary the fixations and passions of monomaniacs are usually given short shrift in the notes, for above all else their conditions are depicted as unattractive, socially disabling and impeding functionality. Unlike the melancholy which John Keats advised sufferers to cure by immersing themselves in nature's beauty and sensual pleasures, monomania was messily conflated with the ugly social

⁵² See Anne Digby, 'The changing profile of a nineteenth-century asylum: the York Retreat', *Psychological Medicine*, 14 (1984), 739-748.

⁵³ See Erin Sullivan, *Beyond Melancholy: Sadness and Selfhood in Renaissance England*, (Oxford: Oxford University Press, 2016) especially Chapter 3: 'Melancholy: Humorous Identity and the Allure of Genius', pp. 87- 125.

depravation of industrialisation.⁵⁴ Many of the monomaniac's fixed ideas or excesses were anti-social and mundane; such as monomanias 'for' or 'with' theft, drunkenness, suspicion and violence. Monomanias more exclusively concerned with disorders of affectivity such as overweening pride, vanity, hatred or love were diagnosed amongst a wider social span, but were not usual amongst working-class men. These latter disorders of affectivity are perhaps the clearest link between a Romantic melancholia and a Victorian monomania, and it is with an example of this cross-over that I begin.

Case (i) Charles Lloyd (York Retreat)

A lapsed Quaker, Charles Lloyd of Brathay, Windermere was admitted voluntarily to the York Retreat in March 1816 by his wife and rich father. He was attended by a servant throughout. Described in his notes as a 'gentleman and poetical author, highly educated' with 'superior talent' and 'superior imagination', Lloyd had in fact endured what is politely described as a 'mixed' reception for his epistolary novel *Edmund Oliver* (1798) and had struggled to emulate the success of the Lake Poets with whom he associated.⁵⁵ He had antagonised his mother, his mentor Samuel Taylor Coleridge, and both Dorothy and William Wordsworth with his characters' unflattering resemblances to them.⁵⁶ Approaching mid-life, aged forty-two, and with a history of episodic mental disease (unspecified in the notes) his diagnosis reads:

State of mind: Religious Melancholy and Monomania

Apparent Causes: Ill regulated feelings & emotions especially Imagination

Removed 7.4.1816 to Dr Willis's Institution

[The patient]... has had the advantage of a learned education & early discovered a genius for Poetry but always showed an unwillingness to apply to any business & as a child has been permitted to follow his own inclinations. Has at times for many years back discovered symptoms of insanity; but about [blank] years ago his case became truly distressing. He imagined himself by an irrevocable decree consigned to eternal flames, that he was doomed to suffer the sins of all mankind that he only should be miserable & everyone else happy.⁵⁷

⁵⁴ John Keats, especially 'Ode to Melancholy'.

⁵⁵ See Richard C. Allen, 'Charles Lloyd, Coleridge, and *Edmund Oliver*', *Studies in Romanticism*, 35:2, 1996, 245-294.

⁵⁶ Whilst Robert Southey (whose wife, Edith, was to spend a period of time at the Retreat in 1834) and Thomas De Quincey sought in some measure to defend the hapless Lloyd against his 'ill-treatment' by the Wordsworths, his life appears subsequently to have been one of literary failure and acute personal angst.

⁵⁷ University of York, Borthwick Institute, The Retreat Archive, MS Papers relating to Charles Lloyd RET/6/19/1/103.

Clinging to a precarious position amongst the men of letters but increasingly regarded by them as a talentless nuisance, Lloyd's aetiology is largely sociological and hints at a life of wasted privilege. The romantic associations of melancholy (here 'religious' given his sense of persecution) are coupled with the modern 'otherness' of monomania. Neither one thing nor the other his record sits on the cusp of an important change in the history of psychiatry in which the humoral orthodoxy of old was being pushed aside to make way for the new nosology. His symptoms are couched in the rhetoric of scholarly over-stretch: his feelings are 'ill regulated' and at particular fault is his 'imagination'. Bodily symptoms are conspicuously absent, although his temperament is described as 'affable'. Characterising his own emotional torment in religious terms, seeing himself as 'consigned to eternal flames' for his sins, his monomania is correspondingly modified as 'religious'. Medical treatments are not listed beyond a vaguely described 'course of medicine' and a recuperative trip to the seaside. This absence of invasive treatment for middle-class men is a feature of the records. Whilst blood-letting and purgative treatments are commonly prescribed elsewhere, middle-class male patients do not appear to be quite so prone to the build-up of bodily blockages which necessitated their use. Lloyd's mental illness continued episodically throughout his life, until his death by unknown causes in a *Maison de Santé* at Chaillot near Versailles in 1839. Lloyd's case typifies a sense of madness as a disease of the highest civilisation in which the refined suffered its greatest incidence. This sense was to become increasingly replaced by what Michael Donnelly calls the 'atavistic regression' of insanity in which the working class who made up the bulk of the visibly insane were perceived to be uncivilised.⁵⁸

Case (ii) Caleb Abell (York Retreat)

Caleb Abell, an unmarried Architect, was admitted to the Retreat in 1829, suffering from 'Monomania with vanity'. Transferred from a private establishment in Dublin by his wealthy family, the notes first record that his condition was not constitutional or hereditary and was, rather vaguely, '... supposed to have been induced by fever'. As in the case of Lloyd, no medical curatives were employed except the shower bath which was found 'useful'. The notes read:

It should be stated that Caleb Abell received a liberal education amongst the Society of Friends, his parents being of a very respectable family in Ireland, his father in the station of Elder. In his youth however he did not make much appearance of the Quaker – heard a sermon at 19 someone had not long to live with various exhortations to repentance. This he applied to himself – 'taking a pair of scissors cut

⁵⁸ Michael Donnelly, *Managing the Mind: A Study of Medical Psychology in Early Nineteenth-Century Britain* (London: Tavistock, 1983), p. 124.

the collar off his coat, & after remained what is called a 'consistent friend' up to his 30th year, mingling much with the upper classes.

Feb 28. Singular looking man, small, well made, effeminate countenance, fond of showy 'chiefs [...] a most preposterous head of hair that would make a Turk jealous [...] is fond of reading and writing, fancies himself a prophet [...] of divine revelations [...] the same ideas prevailing, but his conduct is exceedingly proper, decorous and respectful.⁵⁹

Abell's affable demeanour seems to correspond to a less bodily, more cerebral source of illness. However his 'effeminate countenance', fondness for handkerchiefs and 'preposterous' hairstyle suggest that he transgressed 'proper' codes of masculinity and affected a familiarity with 'upper class' culture deemed pathological. Cases of 'monomania with vanity' are rarely recorded but the possibility that they are pathologized instances of 'deviant' middle-class sexuality, in the absence of Prichard's later category of 'moral insanity', seems distinct. His notes are also the perfect illustration of the value-laden judgements made by alienists on the basis of appearance alone.

Case (iii) Elizabeth Beakbane (York Retreat)

Elizabeth Beakbane was admitted to the York Retreat in 1844 with 'Religious Monomania'. She appears to have become quickly 'averse to the suggestions made to her about leaving the Retreat', having experienced the harsher realities of life in a county asylum. Her notes record the company at the Retreat and its retired grounds as reasons for her improved health. They also record her feeling that she would be 'an object of derision and a laughing stock' if let out and that she wanted to stay until her death. The last recorded note is after an apparently fatal stroke in 1879: in total she spent 35 years at the Retreat. There are just two notes on her entire stay, the first records that in 1854, '... she has displayed much religious exaltation, which has led her to preach in a singular strain at the Meeting of Friends.' And in the same year she caught a train to London for the purpose of presenting an address to the Queen on the Russian War. It appears she was arrested.

Her notes also include a disjointed but clearly anxious letter dated 1855 addressed to the Superintendent in response to enquiries as to whether she felt equal to go into society again. It reads:

After being so many times at a Lunatic Asylum & the unpleasant circumstances connected with it, the disagreeableness of being compelled at any time to leave what I

⁵⁹ The Retreat Archive, MS Papers relating to Caleb Abell, RET/6/19/1/2.

might consider my home when I look seriously at going to Lodgings [She has no home] which of course I should prefer to confinement if I was able to stay in them but I have been tried repeatedly My (?) mind has always become affected, that it seems useless making the attempt. I know it would only be the old thing over again or something worse. The extreme mental agony I suffered before I came here the last time no words can describe.⁶⁰

Case (iv) Selina Bright (Bethlem)

Selina Bright, a 40 year old, married laundress with four children from south London was admitted to the Bethlem on 6th June 1845. Her diagnosis by Morison is recorded as ‘Monomania with jealousy’.⁶¹ Her ‘peculiar delusions’ were that ‘her husband has been married to several other women’ and, in an odd turn of phrase unlikely to be used by a laundress, that ‘females are secreted about her house’. Her disposition is recorded as ‘very irritable’ and she apparently threatened her husband and children with unspecified violence. Placed in a straight waistcoat, she was admitted and subsequently held for one year, after which time she was discharged ‘uncured’. During her stay the patient’s ‘delusion’ as to her husband’s infidelity persisted, although she forgave him and during one of his visits willingly shook hands with him. She is also recorded as being ‘industrious’ throughout her stay, variously employed in scrubbing floors and other house-keeping duties. In the absence of any other symptoms, Selina Bright’s diagnosis of ‘monomania with jealousy’ suggests social deviance but whether or not her suspicions had any real grounding remains unclear.

Case (v) Lucy Chapman (Bethlem)

Monomania is noticeably reduced as a diagnosis in case notes from around 1850, but nymphomania, one of its sub-categories, endured as an adjunct to hysteria. Lucy Chapman, a seventeen year old nursemaid, was admitted to the Bethlem on 9th May 1860. She is described as having ‘various hallucinations ... changes her idea almost every moment – wandering vision – uneasy & restless movements of the hands etc .. she says that her God is walking about the room’. Her condition is linked to the body as the cause of insanity is recorded as ‘Menorrhagia’ or severe menstrual blood loss. Her case notes amplify this diagnosis:

June 4. This young girl became restless and unnatural in her manner whilst engaged as a nursemaid and the cause assigned for these symptoms that the catamenia had been too profuse latterly. Her symptoms vary very much. Some days she will sit down

⁶⁰ The Retreat Archive, MS Papers relating to Elizabeth Beakbane RET/6/19/1/17.

⁶¹ London, Bethlem Hospital Patient Admission and Casebook Registers, 1683-1932, 1845 Case notes. Entry for Selina Bright, pp. 19-20.

quietly and work with her needle and then jump up suddenly and scream violently for some minutes. Again other days she is altogether idle and when remonstrated with answers in a pert manner that she does not care for any one here and shall do as she likes. She is not only saucy but sometimes indelicate in her ways, she will lie on a form (?) with her legs exposed purposely and if the Attendant sets her clothes right, she will again push them off. Her temperament is highly hysterical combined with strong symptoms [of] nymphomania. The catamenia have been regular and proper in quantity since she has been here.⁶²

Following an increase in her 'uterine symptoms' the patient is given camphor tea, a substance which, if taken in too large a dose, produced symptoms of disorientation, lethargy, vomiting, abdominal cramps and convulsions. After being administered this medicine her original symptoms are said to be in 'abatement', suggesting that the camphor had pacified her apparent nymphomania. This record attests to the increasing level of narrative detail in medical observation but also underlines the continuous problematisation of the female body, in this case a seventeen year old girl.

Case (vi) Joseph Walker (Bethlem)

Joseph Walker, a 30 year old married man with one child, employed as a Clerk to a Stock-broker and living in Hackney, was admitted to the Bethlem on the 18th July 1845. He was diagnosed with 'Monomania with a propensity to steal'.⁶³ The cause of his insanity is listed as 'Mental Exertion – much employed with rail-road shares'. The 'remarkable' symptoms of his insanity are in fact described rather unremarkably as: 'Talks largely of money matters – much given to pilfering which propensity he still retains – took away some ornaments from Greenwich [...] nervous and irritable'. He was discharged in November of the same year. Although the details of this case are scant, the modern echoes of overwork and strain are noticeable.

Case (vii) Frederick Kimber (Bethlem)

Frederick Kimber, a 38 year old married man, employed as a Sadler and Harness Maker and living in Fulham, was admitted to the Bethlem on the 21st June 1845. He was diagnosed with 'Monomania with Grandeur'. The cause of his insanity is listed as 'not known'. However he is recorded as being 'impotent for the last two years' in the section on bodily

⁶² Bethlem Registers. 1860 Casebook, pp. 37-38. Entry for Lucy Chapman.

⁶³ Bethlem Registers. 1845 Casebook, Entry for Joseph Walker.

health, and also of having ‘considerable hesitation in his speech’. His peculiar delusions are described as:

None except being rather ambitious. He thinks he has £30,000... He says he is not rich but could get any sum he wanted from the bank. Says he is on intimate terms with the Queen and Prince Albert. On one occasion only he struck his wife because she did not give him money.⁶⁴

He was discharged one month later as a ‘Paralytic’. This case was reflected in asylums across Britain throughout the century, with hundreds of people receiving the diagnosis of ‘general paralysis of the insane’ (later understood as syphilitic madness) after occasionally, as here, having first been diagnosed with ‘Monomania with Grandeur’. The majority of these were middle-aged men, all exhibiting one or more of the disease’s symptoms: grandiose delusions, a staggering gait, disturbed reflexes, asymmetrical pupils, tremulous voice, and muscular weakness. Their prognosis was bleak, most dying within months, weeks, or sometimes days of admission. The fatal nature of General Paralysis made it of particular concern to asylum superintendents, who became troubled that their institutions were full of incurable cases requiring continuous care. Compounding the problem was the erratic conduct of the general paralytic. Delusions about their vast wealth led some to squander scarce family resources on extravagant purchases.

How did the presence of monomaniacal bodies and the lived experience of the asylum complicate the rhetoric of Victorian mental scientists? From the rare pool of monomania diagnoses, these seven illustrative but disparate cases, show that the ‘causes of insanity’ are strikingly sociological. Alongside the entries in the admissions register to the Pauper Asylum at Springfield I examined, in which one might expect the causes to be related to poverty, these more expansive notes from the Bethlem offer a bleak insight into the lives of London’s lower middle class. It is striking how the listed ‘causes’ of monomania (and indeed many other diagnoses) suggest contexts of social isolation, material deprivation and violence. Its use as a label to cover petty acts of violence and theft is very clear. Fragmentary phrases betray meagre existences. Unmarried single women fail to negotiate impossibly difficult lives. Causes are given as: ‘sedentary life – abuse of tea’; ‘seizure of furniture by landlord for rent’; ‘disappointment’; ‘vexation by being robbed’, and often ‘seduction’, a word whose loaded Victorian usage encompasses what we would now call sexual assault or rape. In addition causes commonly used for both genders include: ‘Disappointment in love’ and ‘domestic affliction’. More typically the causes of male insanity are: ‘Poverty and destitution’, ‘Want of

⁶⁴ Bethlem Registers. 1845 Casebook, pp. 30-31. Entry for Frederick Kimber.

employment' and 'Intemperance'. Alcoholism or a 'Monomania for drunkenness' is a predominantly male phenomenon in the asylum. Discussions of their bodily symptoms however are in far less evidence than those of women.

But the most striking thing about the case histories I examined and the admissions records is the low incidence of 'monomania' as a diagnosis, while diagnoses of melancholy and mania are liberally employed. In a search of the Springfield Hospital's Admissions Register for women, I examined all of the 1133 entries. Of these just 24 explicitly referred to monomania. This is just slightly over 2% of the total admissions for the period (and markedly different to the 10% Esquirol recorded for the Salpêtrière during the same period). Similarly, the admissions records for men for the same period used 'monomania' as an initial diagnosis in very rare cases, more often using either 'mania' or 'melancholy'. This may suggest that it was a diagnosis whose practical use in the asylum was in fact much more infrequent than its wider rhetorical presence in scientific literature might suggest, even by those vociferously championing it.

Of those twenty-four entries for 'monomania' used in this admissions register, most are bunched towards the beginning of the decade, particularly amongst the first cohort of 299 patients admitted when the hospital opened in June 1841. Amongst the first fifteen entries for instance, four were monomaniacs. These entries are reproduced in the table below. In the final column the date for either discharge or death is recorded. These four monomaniacs endured an average stay of roughly twenty years in the asylum, where they all died. Emma Ansell, a servant from Lambeth, stayed for thirty-two years. This suggests that her condition, and that of her fellows, may have assumed a level of chronicity preventing any hope of successful discharge or (as in the case of Elizabeth Beakbane), most possibly, that these women became institutionalised and the asylum was a haven. It is notable that they are all single, in low-paid occupations and middle-aged on admission. Although the scope of my examination ended with the paperwork of the asylum, it is evident that the lines between the pauper asylum and workhouse became rather blurred. Those deemed 'incurable' and those simply ravaged by poverty appear to have frequently been shunted from one institution to another, so that in fact the 'warehousing' function of both made their populations partly interchangeable. However, because fed and sheltered, the fact that these women remained for such a long time in the Springfield Hospital bucks a trend of early death. In 1841 the vital statistician William Farr

(1807-1883) compiled figures on the death rates in England's lunatic asylums: they were comparable to those in London during the Great Plague.⁶⁵

Table showing the entries of four monomaniacs whose diagnoses are to be found amongst the first fifteen female patients recorded in the Springfield Hospital Admissions Register.

<i>Date Admitted</i>	<i>Name</i>	<i>Age</i>	<i>Married / Single</i>	<i>Occupation</i>	<i>Parish</i>	<i>Disease</i>	<i>Health</i>	<i>Died</i>
June 14 1841	Sarah Smith	40	Single	Servant	Lambeth	Monomania	Good	Jan 19 1859
June 14 1841	Emma Ansell	38	Single	Servant	Lambeth	Monomania	Good	June 30 1873
June 15 1841	Mary Ann Hutchings	49	Single	Dress Maker	Newington	Monomania (Religious)	Good	May 23 1859
June 15 1841	Anne Marshall	42/43?	Single	[Blank]	Newington	Monomania (Amorous)	Good	Feb 28 1855

Elaine Showalter's classic and important feminist 'one culture' contention that monomania and moral insanity were 'female maladies' deployed by a male medical establishment to regulate and contain what were conceived as aberrant female behaviours and emotions, which can be smoothly read across into the literature of the day is complicated by these figures. These women appear to have often remained in the asylum by choice. It is more probable that the literary Crazy Janes and Bertha Masons of the period were utilised by what Helen Small calls 'the rhetoric of gentlemanly medicine' to bolster their claims to class-cultural savvy and social status, simultaneously satisfying their own 'literary pretensions' and projecting 'refined sensibilities'.⁶⁶ As Small argues, whilst brutal misogyny was no doubt widespread in the asylum system and in the wider culture, the use of literary representations of female insanity in 'gentlemanly medicine' had much to do with a resistance to an increasingly physiological, invasive, 'mechanistic' approach to madness which threatened to overwhelm the

⁶⁵ William Farr, *Vital Statistics: A Memorial Volume of Selections from the Reports and Writings of William Farr* (London: Office of the Sanitary Institute, 1885).

⁶⁶ Helen Small, *Love's Madness: Medicine, the Novel, and Female Insanity, 1800-1865* (Oxford: Oxford University Press, 1996) p. 57.

new profession. It is also worth adding that the use of ‘monomania of love’ or ‘amorous monomania’ or indeed ‘erotomania’ is but one of the many forms of this protean disease.

In the *Report of the Metropolitan Commissioners in Lunacy to the Lord Chancellor* (1844), published in the run up to Lunacy Act of 1845 which placed the provision of state-run County Asylums on the statute book, appended statistics gave the total population of Insane Persons in Asylums in England and Wales on 1st January 1844 as 11, 272 (5521 Men/5751 Women): of these 8736 were considered ‘incurable’. The nosology they piece together offers the first ‘official’ attempt at classification based on widespread practice in England and Wales:

The principal forms of insanity met with in Lunatic Asylums are comprehended, in the Tables which accompany this report, under the following heads:

- I. Mania, which is thus divided:
 - 1. Acute Mania, or Raving Madness.
 - 2. Ordinary Mania, or Chronic Madness of a less acute form.
 - 3. Periodical, or Remittent Mania, with comparatively lucid intervals.
- II. Dementia, or decay and obliteration of the intellectual faculties
- III. Melancholia.
- IV. Monomania.
- V. Moral Insanity.

The three last mentioned forms are sometimes comprehended under the term Partial Insanity.

- VI. Congenital Idiocy.
- VII. Congenital Imbecility.
- VIII. General Paralysis of the Insane.
- IX. Epilepsy.

To these heads may perhaps be added ‘Delirium Tremens,’ since it is mentioned, as a form of Insanity, in the Reports of some Lunatic Asylums.⁶⁷

In their detailed analysis of monomania, the Commissioners make the following observations which explicitly argue that monomania is often more ‘properly’ Melancholia. Its susceptibility to interpretation and appropriation is thus officially recognised given that many patients have periods of lucidity, but that lucidity is not perpetually (and paradoxically) retained in tandem with their delusion:

⁶⁷ *Report of the Metropolitan Commissioners in Lunacy to the Lord Chancellor* (London: Bradbury and Evans, 1844) pp. 102-103.

Monomania, properly so termed, is a form of Insanity, which, from the attention given to it, might be supposed to be of more frequent occurrence than it really is. The term is professedly given to cases in which the intellectual faculties are unimpaired, except with relation to some particular topic. Instances, indeed, are continually occurring in which some particular impression of a delusive and insane kind, occupies the attention of the patient and is uppermost in his mind, but unless the power of reasoning correctly on subjects unconnected with the illusion is retained, the disorder is not a case of Monomania, or 'Partial Insanity' [...] In most instances of Partial Insanity Melancholy connects itself with the subject of delusion. These cases properly belong to Melancholia.

In keeping with the Commissioners' last prescient observation, by 1852 one of the last entries in the Springfield Admissions Register is for a fifty year old labourer's wife named Sarah Briant whose form of mental disorder is recorded, rather confusingly, as 'Melancholy with Monomania', thus reverting back to a nosology prevalent some three decades earlier.

Monomania's flexible contours and its conversely specific sub-types mean that it was always interwoven and conflated with social commentary. Despite the benevolent claims of moral management's proponents, monomania, like the equally protean moral insanity, came to include mental states or behaviours formerly tolerated within the community, despite their eccentric or peculiar nature. As has been well established Victorian asylums were very much a product of this diagnostic creep and increase in the franchise of madness. Moreover, its porous delineation (at different times and by different commentators on mental science) meant that its comprehension in a clinical and symptomatic context was ad hoc. Even Alexander Morison's use of this new disease entity in the period 1841-1852 appears to have been tentative as is evident when comparing the statistics for the same period at the Springfield and Salpêtrière: 2% of admissions as opposed to 10% respectively. In cases which did not fit definitively in either binary, mania or melancholia, patients might be classified as monomaniacal in order to account for a whole range of nuisance behaviours or borderline conditions. Margaret Homberger observes in her excellent thesis on wrongful confinement, that it is crucial to recognise 'a discordant relationship between the *rhetoric* of the psychological physician and the *reality* of the profession's goals and reforms'.⁶⁸ This gap in the noise around monomania and its rather feeble wider practical application was amplified, as Homberger points out, by its deployment in a number of high profile cases of wrongful incarceration, such as Louisa Nottidge. Nottidge was diagnosed with a religious monomania and placed in the Moorcroft House Asylum, Hillingdon by a physician acting under the direction of her mother who disapproved of her daughter's commitment to a dubious cult-leader, one Rev.

⁶⁸ Margaret Homberger, 'Wrongful Confinement and Victorian Psychiatry 1840-1880' (unpublished doctoral thesis, University of London, Queen Mary's College, 2001), p. 18.

Henry James Prince. In ensuing legal battles Nottidge won her case. In her will she transferred all her wealth to Prince, a fate the family had been desperate to avoid.

With the gradual evolution of a narrative approach to recording the symptoms of mental illness shown by the increasingly expansive records and the fuller establishment of a patient's history, the sub-types of monomania, such as nymphomania and kleptomania, are more frequently deployed, possibly as a consequence of monomania's increasing public discredit. However, the records also indicate that those diagnosed with just monomania or a monomania for a particular thing/activity form a small, anomalous group whose 'partial' condition was atypical: on the whole the majority of the asylum population appears to have been defined by chronic conditions. The suggestion that a significant number of patients suffered from various forms of degenerative disease, including dementia, is widely accepted as highly plausible.

In July 1867, Harrington Tuke, then Secretary to the Medico-Psychological Association (the forerunner of the Royal College of Psychiatrists) argued that monomania had actually rarely been used in everyday clinical application:

I speak in the presence of many of the first and most experienced psychologists of Great Britain; and I believe they will concur with me in the opinion that such a monomania is practically an unknown malady [...] It is not surprising, then, to find that many of our writers do not employ it at all; that it is not found in our records or case-books.⁶⁹

Noting the word had become 'ingrafted in the popular language of all the great countries of Europe', Tuke was especially vexed by the 'misapprehension' and 'mischief' caused in cases of disputed wills and the law more generally by the deployment of the term.⁷⁰ Etymologically incorrect because Esquirol himself had confusingly stated that the condition may involve 'one or a limited number of delusions', Tuke lamented the fact that 'monomania' was in fact 'only a symptom, it is not the disease itself; and just as a fast pulse does not prove fever, so a delusive impression does not always indicate brain disorder'.⁷¹ Thus within fifty years of Esquirol's articles and papers on monomania first appearing in Panckoucke's *Dictionnaire des sciences médicales* 1812-1822, the idea was professionally jettisoned but remained at large in the wider community.

⁶⁹ Harrington Tuke, 'On Monomania, and its Relation to the Civil and Criminal Law', *The Lancet*, 90:2300, (1867), 306-314, p. 308.

⁷⁰ Ibid. p. 306.

⁷¹ Ibid. p. 310.

1.4 Fictive Monomania

In my selection of literary texts for this thesis, I illustrate how monomania was available for multiple translations and interpretations. I consider my chosen texts chronologically in order to highlight the idea's mutability over three decades. The extent to which the use of monomania signals a generic 'real' and 'scientific' idea outside of the text; or mediates philosophical ideas about the 'self'; or is absorbed by particular literary conventions, shifts according to each novel's moment of production. To select and discriminate between texts (shown in Appendix 1) I have considered the idea's narrative importance in each. Sometimes, monomania is a superfluous detail. In Charles Dickens' *David Copperfield* (1850), for example, Mrs Markleham, or the 'Old Soldier', ironically self-diagnoses as a monomaniac in her gratitude towards her unsuspecting son-in-law, Dr. Strong, whilst simultaneously unceasingly pressing her own advantage and treating him as a dim-witted meal ticket. Amusing as this is, it is a small flourish of hyperbole, illustrative of the word's comic potential, but not significant to the main plot or central characterisations. Potentially more significant is Dickens' use of the word in *Great Expectations* (1861) when Pip describes his misery in Pumblechook's parlour as he is made to rehearse with aspiring play-actor Mr Wopsle by taking the part of a condemned murderer. Thus humiliated, he imagines Estella's disdain for him as becoming a 'sheer monomania', and by implication, as inversely related to his own growing admiration for her.⁷² Problematically however, and running against the grain of my chosen methodology, it is Miss Havisham who is the most monomaniacal character in the novel. Yet, perhaps in order to treat her plight more seriously or, more sympathetically, Dickens chooses not to describe her explicitly as a monomaniac, reserving its use for comic incident.

Aside from these considerations of narrative importance, and in the pursuit of a distinct, and over-arching social and historic context, I have confined myself to literary texts published in Britain. This has inevitably required difficult omissions. Edgar Allan Poe's short story 'Berenice' was the first published fictive incarnation of monomania in English, included under his own editorship in the *Southern Literary Messenger* in 1835, much to the horror of its reading public who wrote outraged letters following its publication. Poe's use of the idea as a macabre fixation upon a wife's teeth, narrated by the mad husband himself, employs a chilling narrative gap in which we are given enough information to surmise that the narrator has dug up his wife's dead body and extracted all thirty-two of her teeth. Utterly repugnant as this behaviour is, in its choice of narrative voice and intertextual allusions to Greek mythology, it is arguably an important 'psychological' text, but beyond the scope of this thesis.

⁷² Charles Dickens, *Great Expectations*, ed. by Charlotte Mitchell (Harmondsworth: Penguin, 1996) p.117.

My literary parameters of 1836-1860 are grounded in ideas about contingent 'Victorian feeling' and the associated temporal arc showing the usage of the word 'monomania' that I referred to earlier. Thomas Dixon's work in the history of emotions has established how the semantic field of 'emotion' arose with a process of secularisation which replaced the older, looser, metaphysical concepts of 'passion' and 'affection of the soul'.⁷³ With the rise of physiologists like Herbert Spencer (1820-1903) and Alexander Bain (1819-1903) 'feelings' came to be gradually seen as free of any volitional impulse. I will argue that monomania's meanings are sensitive to this contingency as the literature of this time period will demonstrate. Before the McNaughtan judgement of 1843 monomania referred most commonly to a pathological excess of 'passion'. In both *Villette* (1853) and *The Mill on the Floss* (1860) Charlotte Brontë and George Eliot write to preserve this period detail, focusing on the inner lives of female protagonists who are acutely conscious of social convention. I explore how the idea was situated in these novels in relation to the Victorian doctrine of self-control. I argue in my third and sixth chapters, 'Protestant perseverance to treat monomania in *Villette*' and 'Monomania as a (mis)representation of passion in George Eliot's *The Mill on the Floss*' that the 'diagnosis' flounders. For Brontë this occurs in the face of Protestant self-control and, conversely for Eliot's later novel, it struggles against the 'unconscious' forces of physiological impulse which refuse to be contained.

Using this temporal arc, my analysis echoes Rachel Ablow's discussion of the novel form and its development of 'feeling'. Here she offers a familiar literary history but with the crucial addition of an 'emotional timeline'.⁷⁴ A distilled version of this would retain the following key moments: the pre-Revolution cult of sensibility, the self-control and 'sentiment' of the mid-Victorian novel, the 1860s' sensation novel, and finally, *fin-de-siècle* Gothic horror and terror. Ablow argues that a commitment to the social efficacy of emotions waned in the late eighteenth century, in part because of the brutalising terror following the French Revolution, and perhaps more perniciously, because of the newly powerful vagaries and whims of the market-place. Emotions became domestic, the one sphere where they still held considerable sway. So, increasingly set in the home, one of the implicit tasks of the mid-century Victorian novel was the so-called 'sentimental' education of the reader. Stock characters were designed to elicit particular emotional responses and the plot's arc trained the feelings. The implications of 'sensation', the other primary novelistic 'feeling' in the nineteenth century, using its atmosphere of suspense, conspiracy and darkness offered a challenge to this

⁷³ Thomas Dixon, *From Passions to Emotions: The Creation of a Secular Psychological Category* (Cambridge: Cambridge University Press, 2003), p. 2.

⁷⁴ Rachel Ablow, 'Victorian Feeling' *The Cambridge Companion to the Victorian Novel* (2nd edition) ed. by Deirdre David (Cambridge: Cambridge University Press, 2012), pp. 193-210.

supposedly meaningful, homely sense of ‘sentimental’ feeling, as well as to the autonomy of the self, given this genre’s more explicit sense of a prototype unconscious. My fourth and fifth chapters place monomania in this period, at the very beginnings of Sensation and Detective fiction, by considering three previously neglected periodical thriller stories. In Chapter Four, ‘The Monomaniac’: topical villains in *The Ladies Cabinet of Fashion, Music and Romance* and *Chambers’s Edinburgh Journal*, I explore two pieces which re-fashion monomania as a covert, masculine phenomenon signifying a pathological urge to control the domestic space. Whilst this literary phenomenon reached its height in Anthony Trollope’s hefty saga *He Knew He Was Right* (1867), Dinah Craik’s short story ‘The Double House’ (1857) anticipates many of its anxieties and I consider these in my fifth chapter, ‘The monomaniac next door: Marital crisis in Dinah Craik’s ‘The Double House’.

At the end of the nineteenth century an increasing understanding of the neural functions of the brain translated into Gothic Horror which, as Anne Stiles has argued in her work on popular fiction, depicted vampiric ‘humans’ as soulless or semi-conscious.⁷⁵ Coupled with the publication in 1895 of Max Nordau’s best-selling *Degeneration*, the consequently shifting scientific paradigm had miserable significances for the consideration of madness. Monomania became a villainous, criminal phenomenon, hereditarily encoded as in Arthur Conan Doyle’s short story *The Adventure of the Six Napoleons* (1904). Even in this tale however, monomania’s culturally passé and near-obsolescent medical status is highlighted. In the absence of any rational explanation Dr. Watson suggests that the fanatical destroyer of busts of Napoleon has a monomania or *idée fixe* which may be ‘hereditary’ making him ‘capable of any fantastic outrage’.⁷⁶ Unconvinced, Sherlock Holmes exploits this popular suspicion that the criminal is ‘a dangerous homicidal lunatic’, in order to lull the real culprit into a false sense of security. Offering such an opinion to a local hack, much to Holmes’s amusement, it duly appears accredited to him in the newspaper in ‘a highly sensational and flowery’ piece which has the desired effect of encouraging the criminal to continue his activities with impunity, thus foolishly exposing himself to detection.⁷⁷ Therefore in the end Watson’s belief in a monomaniacally driven lunatic is discredited, and the true culprit is revealed as a degenerate, ‘simian’ man with ‘a very peculiar projection of the lower part of the face like the muzzle of a baboon’.⁷⁸ Dr. Watson’s quaint faith in ‘modern French psychologists’ proves to be misplaced, whilst Holmes’s trapping of ‘Beppo’, an Italian pearl thief who moves stealthily like an ‘ape’,

⁷⁵ Anne Stiles, *Popular Fiction and Brain Science in the Late Nineteenth Century* (Cambridge: Cambridge University Press, 2012).

⁷⁶ Arthur Conan Doyle, *The Adventure of the Six Napoleons and Other Cases* (London: Penguin, 2014), p. 130.

⁷⁷ Ibid. p. 140.

⁷⁸ Ibid. p. 134.

relies on a more cool rationality and an unspoken grasp of degeneration theory.⁷⁹ Alongside the text's animal similes (especially the savagery of wolves and the superficial intelligence of apes), Holmes's more modern view of criminality and the potentiality for an associated insanity echoes Henry Maudsley's view that madness was a regression into 'the monkey-pattern' embedded in the primitive layers of the human brain.⁸⁰

In this thesis however, I concentrate on the mid-Victorian novel given its comparative under-representation in pre-Sensation scholarship on literary monomania.⁸¹ It is also the key moment for the disease entity when it is at a cross-over, moving from being a disorder of affectivity and excess, to one associated with the exculpation of first domestic, and then wider, crime. Literary texts are not sites of experiential monomania but expressions of how that monomania is constructed. My intervention considers this literary construction and makes two working assumptions. Firstly, that literary works reflect prevailing emotional standards and suggest ways of managing emotions according to shifting cultural norms. Secondly, that literature sometimes tests the limits of these norms. In the nineteenth-century novel monomania becomes a tool of characterisation and a metaphor to test the emotional standards in play. One way this happens is structurally. In literary discourse the suggestion or exposition of complex pre-histories for characters sometimes exposes the continuum from emotion to pathology, and the fuzzy nature of any crossover. Whereas a 'diagnosis' might have occurred in the asylum because of the immediate, functional impairment of a patient, literary characters are drawn such that any impairment is an anathema to coherent narrative. Put another way, an early psychiatrist may have seen a sporadically catatonic monomaniac, whereas *Great Expectations* gives us the memory of Miss Havisham's traumatising rejection at the altar which in part explains her bizarre behaviour. Her adopted daughter Estella's treatment of Pip as 'sheer monomania', is a behaviour encouraged by Miss Havisham in a perverse attempt to assuage her own psychological distress.⁸² Similarly, the formative influences of early childhood might give coherence to later behaviours: Heathcliff's foundling status and brutalisation at the hands of Hindley for example. Given these pre-histories or what we might read as the emotional rationale for behaviours, mid nineteenth-century literature offers sympathy for the emotionally extreme which in some ways prefigures emergent ideas of the unconscious by allowing the reader to see the hidden forces acting upon a person. I develop this idea in the chapter that follows this introduction, 'A new and fierce disorder's

⁷⁹ Ibid. p. 144.

⁸⁰ Henry Maudsley, *Body and Will: Being an Essay Concerning Will in its Metaphysical, Physiological and Pathological Aspects* (London, 1883), p. 240.

⁸¹ Most particularly, Jenny Bourne Taylor, *In the Secret Theatre of Home: Wilkie Collins, Sensation Narrative, and Nineteenth-Century Psychology* (London: Routledge, 1988).

⁸² *Great Expectations*, p. 117.

raging': *Mary Barton* (1848)'. Elizabeth Gaskell's novel instructs her readers on the pathogenic environment endured by the Manchester labouring classes in the 1840s. Re-fashioning monomania as part of the psyche's inevitable response to privation in a gothically-inflected domestic interior inhabited by the widower John Barton, and an industrial cityscape wandered by prostitute Aunt Esther, I argue that Gaskell appeals for an empathetic response to addiction and mental illness.

Chapter One: ‘A new and fierce disorder’s raging’: *Mary Barton* (1848)

The New Endemic

It is with sorrow we relate
 A subject that is now engaging
 The faculty. The doctors state
 A new and fierce disorder’s raging:
 And that, like cholera, ‘tis found
 Where dirt and laziness abound.
 It much resembles, people say,
 The class of monomania.
 The patient has the utmost hate
 To all that’s noble, high, or great.

Anon., 8 November 1836, *The Times*

In Elizabeth Gaskell’s *Mary Barton: A Tale of Manchester Life* (1848) political agitator, John Barton, and his sister-in-law, fallen woman Esther, are gripped by obsessive, avenging missions fostered by the pathogenic environments they inhabit. The narrative refers to both as monomaniacs: John Barton’s ‘diseased thoughts’ are a ‘monomania’ which becomes ‘haunting’ and ‘incessant’, and Esther pursues her mission to save her niece from ruin with ‘monomaniacal incessancy’.¹ They also share some salient characteristics: the loss of a child through starvation, a recourse to opiates and alcohol to blot out misery, an expulsion from the normalising world of domesticity and a partially un-narrated existence lurking somewhere on the fringes of industrial society. In this chapter I ask how Gaskell uses and adapts the idea of monomania, and to what ideological ends. Placed foremost in the novel, the physical suffering of the working class, particularly the hunger of children, the effects of industrial injury (Margaret’s blindness from close needlework, Mrs Wilson’s limping gait as a consequence of

¹ Elizabeth Gaskell, *Mary Barton*, ed. by Shirley Foster (Oxford: Oxford University Press, 2006), p. 164, 154. All further references are to this edition and are included in parentheses in the text.

an accident at the factory, John Barton's stunted growth through a low-wage subsistence diet) and the prevalence of diseases like typhus fever resulting from insanitary conditions and ubiquitous dirt, are meant to appal. But how Gaskell attempted to convey the psychological suffering of the labouring classes is my concern here.

1.1 John Barton

Barton is introduced in the opening chapter by an ethnographic narrative voice; he is 'a thorough specimen of a Manchester man; born of factory workers, and himself bred up in youth, and living in manhood, among the mills' (7). Against the elegiac pastoral of Green Heys Fields where we are introduced to the Bartons and the Wilsons enjoying an idyllic May afternoon, he is distinctly urban: almost 'stunted' having endured a childhood of 'scanty living' the result of likely 'improvident habits' (7).² But to begin with his physiognomy is favourable for: 'the good predominated over the bad in the countenance' (7). This changes quickly. Weakened irrevocably by grief following the death of their malnourished, ten month old son with scarlet fever, Mrs Barton's mental strain causes her death and she exits the narrative. The widowed John Barton, arriving at her deathbed too late with a frustratingly dawdling doctor, is transformed by grief: 'His gloom and sternness became habitual instead of occasional' (22). A pattern in Gaskell's novels, the father becomes the only source of authority for the daughter and, as has been often noted, things quickly go awry as Barton 'fixates' on the gap between rich and poor.³ Difficult, sometimes murderous, fathers appear in a range of subsequent gothic short stories Gaskell wrote and as Laura Kranzler observes they 'often seem modelled on the vengeful Jehovah of the Old Testament': self-righteous, aggressive, turning their violence against wives or children, as indeed Barton briefly does when he beats Mary, albeit to his bitter regret.⁴

With the 'good influence' of his wife gone and not without coincidence, in the next paragraph the reader is informed rather inauspiciously that John had 'become an active

² See Elizabeth Gaskell, *North and South*, ed. by Angus Easson with an introduction by Sally Shuttleworth (Oxford: Oxford University Press, 1998) p. 84. This 'improvidence' is also mentioned early on in Gaskell's later novel, *North and South* (1854-55), by Thornton on his first visit to the Hales as a bar to the working class 'getting-on'. It has the double effect of inoculating the narrative against charges of sentimentalism in its portrayal of the working class and also establishes thrift and self-denial as key virtues. Sally Shuttleworth also points in her introduction that critics of *Mary Barton* like W. R. Greg saw the needs of the working class not as material but as moral, particularly their improvidence and lack of firm will.

³ Jill L. Matus makes this point in her discussion of emotions in the novels: '*Mary Barton* and *North and South*' in *The Cambridge Companion to Elizabeth Gaskell*, ed. by Jill L. Matus (Cambridge: Cambridge University Press, 2007) p. 31.

⁴ Laura Kranzler, 'Introduction' to Elizabeth Gaskell, *Gothic Tales* (London: Penguin, 2000) xxi. Kranzler identifies Lord Furnivall in 'The Old Nurse's Tale', Squire Griffiths in 'The Doom of the Griffiths' and M. de la Tourelle in 'The Grey Woman' as examples.

member of the 'Trades' Union' (23). But this apparently misguided move is somewhat counterbalanced by an exposition explaining his point of view on the contrast between rich and poor. Being, in George Eliot's words 'constantly misled by a love of sharp contrasts – of 'dramatic' effects', Gaskell makes her point unsparingly by offering a vignette from Barton's past.⁵ As he gazes through a shop window at all the 'edible luxuries' whilst unable to buy nourishing food for his dying son ('the cynosure of all his strong power of love') because work has been suspended at the factory, his factory boss's wife breezily emerges from inside pursued by a shop-hand who is laden with a bountiful supply of party-food (24). The reader is given little in the way of nuance and the material causes of Barton's anger are brightly lit. He is also accorded some shrewd insight into the workings of industrial economics by having the correct view following the fire at Carson's mill, that his boss will welcome the interruption to the payment of wages. But the high point of his self-less heroism arrives in his seeking to help the starving Davenport family and here the novel's brooding atmosphere of anxiety sharply intensifies. Evidence of the factory's profits are amply represented by another angrily juxtaposed depiction, this time of the Davenports' squalid, dank basement and the breakfasting Carson family's airy library. Empty-headed Amy Carson is a kind of Mancunian Marie Antoinette, memorably lamenting the lack of cut-flowers in their luxurious house, for 'Life was not worth having without flowers' (68). We also learn (via the wry reported speech of a servant) of Mrs Carson's argument with her friend, Miss Jenkins, as to who has the 'worst headaches' (66). The portrayal of the idle, self-regarding rich boasting about their endurance of what are effectively 'fashionable' headaches is unforgiving. Meanwhile George Wilson stands anxiously in their home having come to beg for an Infirmary order (that is free hospital treatment) for the dying Davenport.

In Chapter VIII the novel blends historic fact, incorporating the submission of the Chartist petition to parliament in 1839. Barton is chosen as one of the Manchester delegates and holds an ironic 'levée' the night before. Struggling to articulate sensible demands, or making demands which would apparently be to their detriment, for instance when Mrs Davenport insists that children under the age of ten should not be kept from factory work, the text suggests that the uneducated, working class do not know what is good for them. Rather, they are sometimes unwitting participants in their own subjugation. Returning from London following the presentation of the petition, defeated and hopeless, Barton's habitual and symbolic vigil at the now cold family hearth is accompanied by his smoking or chewing lumps of opium, the smell of which Mary 'loathes'. Unable to secure work in view of his Chartist and

⁵*The George Eliot Letters*, ed. by Gordon S. Haight (Oxford: Oxford University Press, 1954) II, p. 86. See 'Letter to Mrs. Peter Taylor, 1 February 1853'.

Trades' Union connections, gradually the house is emptied of all its 'superfluities' (including blankets) to pay the rent.

Through Mary's childish eyes, we learn that at dusk there are shadowy visits to the house by Trades' Union activists:

...she had learned to look with dread towards the window, which now her father would have kept uncurtained; for there were not seldom seen sights which haunted her in her dreams. Strange faces of pale men, with dark glaring eyes, peered into the inner darkness, and seemed desirous to ascertain if her father was at home. Or, a hand and arm (the body hidden) was put within the door, and beckoned him away. He always went. (115)

Nameless, wary of crossing the domestic threshold, and monstrously disembodied if they do so, these unionists appear to command the now zombie-like Barton. Mary's naïve narration allows Gaskell to suggest a growing tension around their activities in which Barton is being furtively lured into treachery. It also avoids any 'real' analysis of their desperate response to the mill-owners' intransigence because a child's concern would not extend beyond reconciling themselves to the sight of a parent behaving strangely. As Patrick Brantlinger puts it, at this point in the text, we observe the transformation of 'John Barton the frustrated Chartist,' into 'John Barton the vindictive unionist'.⁶ Gaskell's decided antipathy towards Trades' Union officials, or what the banqueting industrialists in *North and South* view as a 'rascally set of paid delegates' is offered without qualification (163). Whilst Henry Carson is villainous and predatory in his treatment of Mary, in their co-opting of Barton into the murder of the mill-owner's son, these officials become irrevocably evil. For example, the nameless 'gentleman from London', a paid official who visits the downcast deputation in the Weavers' Arms following their humiliating meeting with the masters, is shifty, indifferent, 'far from earnest', 'doubtful' and like 'an unsuccessful actor' (as was Daniel McNaughtan) (180). He gains their favour with pipes and liquor, with added golden sovereigns for the delegates, before delivering a flourish of demagoguery lauding the violence of Brutus and then swiftly exiting, leaving this loose incitement hanging in the air. With the unequivocally contemptuous cartoon of the deputation drawn by Carson shared amongst the men, lots are gothically drawn in a ceremonious huddle for his assassination. By the time Gaskell wrote *North and South* seven years later, her view of workers' Unions is a little quieter but their punishment of blackleg

⁶ Patrick Brantlinger, 'The Case against Trades Unions in Early Victorian Fiction', *Victorian Studies*, 13:1 (1969), 37-52.

labour is an issue which she continued to find particularly problematic and which, as Sally Shuttleworth puts it, she ‘neatly sidesteps’.⁷

Whilst the murder of Thomas Ashton, the son of a mill-owner in Hyde, Manchester, in 1831 is frequently claimed as a pattern Gaskell used for the murder of Carson in *Mary Barton*, Brantlinger cites her letter in which she notes that she had had ‘one or two similar cases at Glasgow’ in mind, ‘as having shown [her] to what lengths the animosity of irritated workmen would go’.⁸ This refers to the Glasgow cotton spinners, who in 1837, had assembled in a ‘conclave’ and then beaten a strike-breaking ‘nob’ to death. Although the most serious charges were unproven, a sense of pre-meditation and collective murderous intent was attached to the unions which resonated throughout the press for years. Seemingly, Barton’s descent into criminality is partly based upon this.

Before he disappears from the story in a lengthy narrative gap during which the murder occurs off-stage (thus allowing some retention of our sympathy) Gaskell attempts to convey Barton’s desperate psychology. Whilst he is never afforded the privilege of a free indirect discourse merging with that of the narrator’s, the omniscient narrator’s tone is one of a sympathetic observer detailing a pitiful case-study. His brooding disposition is attributed to hunger and opium use, such that ‘the body took its revenge for its uneasy feelings’ (164). Thus examining his frame of mind, he is diagnosed with monomania:

The same state of feeling which John Barton entertained, if belonging to one who had leisure to think of such things, and physicians to give names to them, would have been called monomania; so haunting, so incessant, were the thoughts that pressed upon him. I have somewhere read a forcibly described punishment among the Italians, worthy of a Borgia. The supposed or real criminal was shut up in a room, supplied with every convenience and luxury; and at first mourned little over his imprisonment. But day by day he became aware that the space between the walls of his apartment was narrowing, and then he understood the end. Those painted walls would come into hideous nearness, and at last crush the life out of him. And so day by day, nearer and nearer, came the diseased thoughts of John Barton (164).

Linked explicitly with gothic notions of ‘haunting’ and a grimly ironic context of luxury and plenty, Barton’s sense of futility and powerlessness is played out and monomaniacally ‘the only feeling that remained clear and undisturbed in the tumult of his heart, was hatred to one class,

⁷ Sally Shuttleworth, Introduction to *North and South*, ed. by Angus Easson (Oxford: Oxford University Press, 1998), p. xxv.

⁸ *The Letters of Mrs. Gaskell*, ed. by J.A.V. Chapple and Arthur Pollard, (Manchester: Manchester University Press, 1996), p. 196.

and keen sympathy with the other' (65). Increasingly consumed by these 'diseased thoughts' which are willing him towards the violent assassination of Harry Carson, his predicament is likened to a cruel torture devised by the ruthlessly cruel, popish Borgias (popularised in early nineteenth-century drama and opera by Victor Hugo and Gaetano Donizetti) in which the walls around him are narrowing towards an inevitable nightmarish crush. A similar device is used by Edgar Allan Poe in *The Pit and the Pendulum* (1843) in which having just escaped the swinging, (potentially slicing) pendulum, the prisoner (in this story, of the Spanish inquisition,) realises that the encompassing red walls painted with fiendish faces are closing in on him and pushing him towards the depthless pit. By inference the industrialists are likened to the Borgias here in their creation of torturous mental suffering – an allusion which can have only added to the antipathy some of them expressed towards the novel – and Barton, fully conscious of his predicament, is pushed towards a horrifying finale. As the Victorians found their identity most securely realised in their homes, this is a fitting projection of a deteriorating psyche. With decreasing access to the comforts of domesticity, Barton's 'diseased thoughts' grow more intense.

Gaskell also blames this mental degradation, in part, on his use of opium. Without the 'leisure' of diagnosis or access to a doctor and orthodox medicine, Barton resorts to opiates (opium, morphine and heroin) which were, after all, cheerily marketed as promoting mental well-being. Whilst middle-class dependence on opiates was considered acceptable in the mid-century, working-class opium use was regarded with some anxiety, as it was thought to interfere with the efficiency of the workforce. This was intensified by the Temperance movement who argued that its use as a cheaper alternative to alcohol was widespread, and public campaigns led to the beginnings of its legal regulation in the 1868 Pharmacy Act. Nonetheless throughout the mid-century products like 'Godfrey's Cordial', 'Mother's Quietness' and 'Mrs Winslow's Soothing Syrup' were widely used and resulted in babies (of all classes) becoming tolerant to laudanum, whilst many druggists sold their own-brand versions of these 'tonics' with eye-watering quantities of opium erratically mixed in. The working class were seen as particularly vulnerable given their alleged luxurious, 'stimulant' use of the drug, and working-class mothers were unfairly considered more likely to resort to its use to dose their children while they went to the factory.⁹ Drawing a distinction between medical and non-medical use was thus morally loaded and Gaskell's sympathetic portrayal of Barton's use is bold. Appealing to its beneficial effects of relieving hunger pains and promoting 'forgetfulness' in the face of relentless 'want', she addresses the reader with a typically direct

⁹ Virginia Berridge and Griffith Edwards, *Opium and the People: Opiate Use in Nineteenth-Century England* (New Haven: Yale University Press, 1987), p. 105.

question used when she is flagging up an issue of contemporary social import: 'Would you not be glad to forget life, and its burdens?' (164).

Thus conscious of his own 'incipient madness', Barton self-medicates to try and dispel an enraging awareness of class oppression which erodes his religious faith and leaves him questioning whether inequalities in wealth are in fact God's will. Gaskell suggests that lacking the education to channel these thoughts into an effective response, the consequence is his dangerously 'widely-erring judgement' (165). What Gaskell herself proposes as a proportionate response to a predicament such as his, has traditionally been seen as the novel's political conundrum, but whether or not she is advocating any particular response, it is clear that this consciousness must be addressed or at least acknowledged by the middle class. It is the interrogative heart of the novel, presenting the dispossessed to an audience not used to their psychic proximity. When Barton finally returns to the family home, after the acquittal of Jem for the murder and the novel's romantic resolution, he again sits out of habit by the hearth which is now a grate of ashes. His body is an 'automaton' (341). Although Barton is doomed by his own troubled conscience, Mary is prepared to accept that 'his crime was a thing apart' (341). But 'his spectral look' foreshadows death and as with Esther there will be no redemptive reversal. Gaskell's epigraph to the chapter, taken from Milman's *Fazio*, declares in an accusatory tone: 'Thou hast usurp'd God's high prerogative/Making thy fellow mortal's life and death/Wait on thy moody and diseased passions' (305). Whilst this might be read as a magnification of Barton's own conscience, there is no doubt that his crime, which has robbed Carson of a son in an unspoken act of equivalent vengeance, is meant as an instructive warning to the middle class.

1.2 Esther

Mary Barton's wayward Aunt Esther has a monomania of a different order. Punished not just for her class, but also her gender, she is completely exiled from the home. Early on in the novel we learn that she has left the Barton household following an argument with John Barton whose suffocating opinions on women run the full gamut from what are appropriate dress codes and suitable modes of employment, to their culpability in prostitution. Given the importance of community and mutual help in the novel, she is its most isolated character and condemned most particularly by a man of her own class. As Carolyn Lambert observes, 'She has no parents, we never learn her full name'; and so her vague origins set up an ambiguity of associations, simultaneously biblical and supernatural.^{10 11} This ambiguity mirrors the text's

¹⁰ Carolyn Lambert, *The Meanings of Home in Elizabeth Gaskell's Fiction* (Brighton: Victorian Secrets, 2013), p. 118.

¹¹ The Book of Esther tells the story of how she risked her own life to save the Jews from annihilation during the Babylonian exile. This act of bravery is celebrated during the Jewish festival of Purim.

treatment of prostitution as an issue for middle-class guilt on the one hand, and fear on the other. With her beauty, viciously described by Barton as 'a sad snare', and possessing a manner that was 'puffed up', she is a woman whose (overly) bold spirit has fostered an aspirant desire to become 'a lady'. But Barton unflinchingly predicts that she is more likely to become a 'street-walker' and in this vein, mediated by his harsh voice, the text speculates that her aspirations have been encouraged by an independent wage from the factory which has estranged her from a traditional domestic role and also allowed purchases of 'artificial' and 'fly-away veils' (9). Adamant that Mary, who worryingly resembles her pretty Aunt, will not become a factory worker, Barton's anxieties represent a commonly voiced concern about the consequences of women entering the world of organised labour.

Thus domestically disruptive Aunt Esther, who runs away to Chester with a wealthy lover who deserts her after three (albeit happy independent) years, is set up early on in the text as a warning to the young Mary. In order to become a domestic heroine Mary must avoid the transgressive perils of an emerging consumer culture which allowed women to fashion themselves. But most importantly she must not be sexually deviant. She must avoid thinking that she can better her situation in life with flighty, sentimental notions of marrying 'one far above her' gleaned from the cheap romances Miss Simmonds' workers recommend to each other. The author of this warning however, is not Barton, whose 'political' solution is a failure, but Esther herself, who wields a more potent maternal power and is in many ways the orchestrator of Mary's fate.

Esther's gothicised re-appearance in the text is her night-time intervention with John Barton, the only dramatized scene between the pair. Now an alcoholic, she has returned to Manchester's streets broken and penniless. Prostitution is framed as her only option following a failed business venture as a small-scale haberdasher which she necessarily neglected during her daughter's illness. Meanwhile, having left his starkly lit Trades' Union meeting with its grim testimonies of woe, Barton is touched lightly on the arm in the 'darkness visible' of the rainy streets. Esther's plight is conveyed through her costume, her bedraggled finery 'now dirty white' and gaudily inappropriate 'gay-coloured barège shawl' (121). Failing to recognise her, confusion ensues, in which Barton assumes that she is soliciting for business and aggressively dismisses her. Unable to communicate successfully, Mary's potential working-class saviours remain atomised and incapable of forming a sensible union. When Esther bravely persists in trying to deliver her warning about the danger Mary is in, Barton, in a foreshadowing act of characteristic violence, drags her under the lamplight for evoking his dead wife's name. This reveals her as a grim parody of refinement with 'unnaturally bright grey eyes', 'glaring paint' and 'sharp features,' although here they suggest hunger, her emaciation hidden by prostitute's garb (121). Angrily blaming her for the 'murder' of his wife and flinging

her against the lamp-post, Esther is left in a faint whereupon she is arrested for 'disorderly vagrancy' (122). Unfairly, she is imprisoned for a month. The text spans genres here: the realist family saga of the plot positions Esther as a victim, Barton (as he later realises) is cruel, as is her incarceration. But the gothic dynamic of the episode; her restless wandering and vamp-like appearance, also suggests a life-in-death punishment by society for her 'sins' echoed by her apparently incoherent ramblings and the withdrawal symptoms from alcohol she experiences in her cell.

A month later, during which time the wholly despicable Carson has preyed on Mary, Esther is released. Whilst fully reintegrating a prostitute might strain credulity, Gaskell instead gives her abiding mission and role as a would-be surrogate mother new impetus:

One thought had haunted her both by night and by day, with monomaniacal incessancy; and that thought was how to save Mary (her dead sister's only child, her own little pet in the days of her innocence) from following in the same downward path to vice. To whom could she speak and ask for aid? (154).

Governing her will and organising her feelings into a constructive course of action, Esther's resolve manifests itself as a 'monomania', not represented here as a pathology but rather as a consciousness of how society subjugates her gender. Indeed, Esther's desperation, like Barton's, is gothically 'incessant'. Her role as the secret and invisible guardian of her niece's fate, resolute, firm and 'monomaniacal', gives her an agency matched only by Mary in the text. Both her interventions, firstly with Barton, and subsequently with the self-made Jem, have their consequences for her niece. Following his meeting with her, Barton is plagued by a 'terrible superstitious fear suggested by [Mary's] likeness to Esther' and he upbraids her for not courting Jem's affection, a remonstrance which is structurally situated to counter her growing attraction to Harry Carson (124). So whilst detached from domesticity, Esther also enjoys a freedom which Deirdre D'Albertis suggests 'perversely reinvents feminine influence to encompass seduction, culpability, and carnal experience, all ostensibly beyond the domestic sphere'.¹² Despite being marked with a 'leper-sin', and being 'unclean', leading others to shy away from her morally (and as was widely believed, actually) contagious touch, her monomaniacal mission is a success. Her association with physical and mental breakdown is formulated as the result of brutal treatment at the hands of an unforgiving world (154).

Lurking in purgatorial darkness just outside the hellish furnace of the foundry, Esther's climactic meeting with Jem allows for a complete exposition of her shadowy past and

¹² Deirdre D'Albertis, 'The Streetwalker and Urban Observations' in *A Norton Critical Edition: Mary Barton* ed. by Thomas Recchio (New York: Norton, 2008), pp. 583-593, 583.

to insinuate the emerging parallel of Mary Barton's life - something which she grasps only hero Jem can change. The omniscient narrator evokes *The Rime of the Ancient Mariner* throughout; Esther stops him, grips his arm and 'He listened like a three-year child' (155). Her tale is told 'with a wild vehemence, almost amounting to insanity', revealing her chronic dependence on drink, the only thing which keeps her from suicide, and all the while 'glaring round with terrified eyes, as if dreading to see some spiritual creature' (157, 159). Her supernatural intervention thus setting in motion the salvation of Mary from the perils of sexual temptation, Esther's wandering mission is complete, and her physical demise assured. Contaminated, she will have to die. The prostitute's viewpoint, like Barton's, is never merged via free indirect discourse with the narrator's and Gaskell is at pains to preserve this distance between her pitiful criminality and sympathetic observation.

Esther's disguised visit to her former home is placed when Mary is at her lowest ebb thinking that Jem has killed Harry Carson in a fit of romantic jealousy. Morbidly dwelling on the possibility of Jem hanging ('The gallows! The gallows!' (224)) she (and not the narrator because that might lend credence to the suggestion) begins to question her own sanity. Drifting into an exhausted, tearful sleep on the cold, stone flags of her home she thinks of '...those days when she hid her face on her mother's pitying, loving bosom, and heard tender words of comfort ... when she had felt as if her mother's love was too mighty not to last forever' (224). In her dream '...her mother came to her, and kissed her as she lay, and once more the dead were alive again' (225). Awakened by a noise, and with the reader thus prepared for Esther's merciful entrance as a maternal saviour, the scene is mediated via Mary's consciousness. We are told of her disquieting sense that 'something spiritual were near; as if the dead, so lately present in her dreams, were yet gliding and hovering round her, with their dim, dread forms' (225). Thus believing her dead mother has returned to see her, Mary falls into the spectral Esther's arms and symbolically guides her across the threshold like a more favourably duped Christabel dragging in Lady Geraldine (230). Bringing the crucial piece of wadding used in the murderer's gun which will vindicate Jem's innocence but implicate Barton, prostitute-turned-detective Esther's heroic monomania is now fully vindicated. However, her ingenuity, verve and heroism do not confer redemption. Esther feels 'repugnance' for her strangely 'over-acting' Aunt Hetty who has concocted a fanciful tale that she is now a mechanic's wife in a desperate attempt to hide her true self. To tragically underline the sense of shame that Esther feels, she pushes Mary away when the grateful girl tries to kiss her, as though feeling her own touch is unworthy and infectious. Later, the swift, consumptive death of the delicate, beautiful but short-lived 'Butterfly' is prefigured by her symbolic gaze through the Bartons' window at her former domestic hearth. Irrevocably

tainted by prostitution, her passage to Canada with the now united Jem and Mary is an impossibility, and once inside the home she ceases to exist.

1.3 Alienation gothically formulated

In its depiction of working-class sayings, ballads, itemised descriptions of domestic interiors and food, Gaskell's novel appears almost ethnographic and might sit comfortably next to Friedrich Engels' *The Condition of the Working Class in England* (published in 1845 in Germany) as provocative and urgent. The attendant psychological suffering however required a different mode of description. Realised via gothic tropes and conventions, the monomaniacal characters of John Barton and Esther are offered to the reader in a project of instructive sympathy. This causally links material privation to mental illness, and in so doing presents their addictions (opium and alcohol respectively) as a form of self-medication. Their monomanias are equivalent to a tormenting class consciousness. Their over-abundant imaginations refuse to accept their lot. But as liminal victims of the industrial process, a political solution to the predicament of Barton is presented as gothic given the echo of eighteenth-century revolution it evokes, and Esther's distance from orthodox Christian morality similarly ensures her gothic incarnation (for Barton also, like Union committee-man and 'infidel' Nicholas Higgins in *North and South*, religion is largely 'humbug').¹³ Beyond what is respectable and dangerously close to what is seemingly sordid, they are also beyond the conventions of realist narrative. Instead the text offered its nineteenth-century cultivated reading elite a formidable version of this new alienated, industrial psychology with all its wretched horrors.

This gothicised version of monomania is unique amongst the texts considered in this thesis and anticipates the literary link adopted by writers of Sensation fiction in which aberrant psychology often forms an explicit part of a villain's make-up. Barton's monomania, particularly, reflects the press furore surrounding the wave of high-profile assassination attempts across Europe in the 1840s. Rather like the ambivalence in her wider text, it is a version of monomania both proto-sensational in the projects its sufferers pursue (murder and detection respectively) which are gothically realised, whilst also signifying a 'real' nervous collapse brought about by the strains of class oppression and female subjugation. To clarify, here I rely on a definition of the gothic which is characterised by a plethora of 'stock features' which make it recognisable as a popular genre: fragments of text (the romantic Valentine card

¹³ Elizabeth Gaskell, *North and South*, (Oxford: Oxford University Press, 1999), p. 222.

turned gun-wadding), horrible images and life-threatening pursuits (the Unionists); spectres, corpses (both Esther and Barton); fainting heroines (Esther); labyrinthine streets; tropes of entrapment (Barton's narrowing walls); associations with filth (Esther's tattered clothing); doubling (Esther and the elder Mary Barton); the toxic effects of guilt and shame; nocturnal landscapes and dreams; fires and the characters' supernatural intrusions in the plot. These fantastical features are suggestive of imagined and realistic threats which can be safely exorcized in fiction. Therefore the Gothic tends to reinforce, if only in a novel's final pages, culturally prescribed doctrines of morality and propriety.

The novel was rightly read by contemporary critics as a warning to its middle-class readership: reprisals are an inevitable consequence of a lack of Christian kindness by employers to their workers. Evidence of Gaskell's sympathy is not hidden: where Barton's crime is treated with notable equanimity, the legal redress pursued by Mr Carson is treated far more unfavourably.¹⁴ Barton's troubled conscience alone is presented as his sufficient punishment. Immediate criticism therefore focused attention on her presentation of the mill-owning class and Gaskell's Manchester industrialist friend William Rathbone Greg's piece in the *Edinburgh Review* is often cited as amongst the most unflinching. There was, he wrote, an 'injurious tendency' in the tale towards the masters. In an oft-quoted paragraph he states that: '...the working classes, and they only, can raise their own condition; to themselves alone they must look for their elevation in the social scale; their own intellect and their own virtues must work out their salvation; their fate and their future are in their own hands, - and in theirs alone'.¹⁵ Although in many ways the novel does promote exactly this sentiment via Job Legh and Jem, Greg's review was more concerned with absolving the industrialist class of all responsibility and giving the market free rein to govern human behaviour.

That aside, Greg's criticisms of the novel's economics did not prevent him quoting a lengthy passage from it for inclusion in his account of prostitution in the *Westminster Review* in the following year.¹⁶ Where John Barton's psychology and acute consciousness of the disparity between rich and poor had failed to move, Esther's explanation to Jem of the circumstances leading to her prostitution are reproduced in full as typifying the experience of such women. Indeed his article seeks to show that prostitution was an activity many women (and children) were intermittently forced into by nothing other than sheer hunger and chimes fully with *Mary Barton*. Although based largely on a survey of prostitution in Paris, the statistics are shocking

¹⁴ Kathleen Tillotson, *Novels of the Eighteen-Forties*, (Oxford: Oxford University Press, 1954), p. 220. Tillotson makes the point that while John Barton's failure as a Christian is almost extenuated, Carson's failure provokes the novel's severest comment: 'Oh! Orestes! You would have made a very tolerable Christian of the nineteenth century' (Orestes was so vengeful that he slayed his own mother).

¹⁵ W. R. Greg, 'Mary Barton; A Tale of Manchester Life', *Edinburgh Review*, April 1849, pp. 402-435, 435.

¹⁶ W. R. Greg, 'Prostitution', *Westminster and Foreign Quarterly Review*, 23 July 1850, pp. 448-506.

even to the modern eye, and Greg does not refrain from revealing that children as young as ten were not uncommonly recruited and reserved for particular ‘clients’. In a passage almost immediately following his quotation of Esther’s story he imagines a prostitute’s demise:

Then comes the last sad scene of all, when drink, disease, and starvation have laid her on her death-bed. On a wretched pallet in a filthy garret, with no companions but the ruffians, drunkards, and harlots with whom she had cast her lot; amid brutal curses, ribald language, and drunken laughter; with a past – which, even were there no future, would be dreadful to contemplate – laying its weight of despair upon her soul; with a prospective beyond the grave which the little she retains of her early religion lights up for her with the lurid light of hell, - this poor daughter of humanity terminates a life, of which, if the sin has been grievous and the weakness lamentable, the expiation has been fearfully tremendous.¹⁷

I reproduce this passage to illustrate what may be partly Gaskell’s proximate literary influence, but also a wider, general tendency to gothicise working-class psychology (even in ostensibly factual reports), as though there is no other register available. Conceived always in quasi-religious, ‘hellish’ (here, ‘lurid’) terms the pattern of causal privation unrelieved by mental ‘weakness’ and disappearing faith is repeated. Esther by these standards, is therefore uniquely vigorous amongst her class in her monomaniacal efforts to ‘rescue’ Mary. Indeed, rather like another key literary Victorian prostitute, Nancy in *Oliver Twist* (1837-39), whose motherly anxiety for Oliver is conveyed via weight loss and alcoholism, Esther’s monomania is also an ‘illness’ devised to convey compassion. As Esther’s ‘mission’ is an individual act of morality in response to a social problem, and also an act of familial import, the text insists on its rightfulness. Political solutions however are not treated with any favour.

Modern criticism often cites Gaskell’s reference to *Frankenstein* and has been used particularly by Marxist critics to upbraid her on the text’s ‘conventional’ politics. Writing intrusively she makes a connection between the ‘people’ and the Creature:

The actions of the uneducated seem to be typified in those of Frankenstein, that monster of many human qualities, ungifted with a soul, a knowledge of the difference between good and evil. The people rise up to life; they irritate us, they terrify us, and we become their enemies. Then, in the sorrowful moment of our triumphant power, their eyes gaze upon us with mute reproach. Why have we made them what they are; a powerful monster, yet without the inner means for peace and happiness? (165)

¹⁷ Ibid. p. 456.

Her erroneous conflation of Frankenstein and the Creature is unfortunate as it results in a failure to acknowledge that Mary Shelley's Creature is actually far more eloquent than his Maker and certainly not 'mute'. The Creature, after all, is morally sophisticated by the time he has read through *The Sorrows of Werter*, *Paradise Lost* and Plutarch's *Lives* and despairingly set himself on fire in the Arctic wastes, fully appreciating his predicament with a horrified clarity. Barton and Esther arrive at their monomanias with a similar clarity: fully conscious of their inescapable positions, they are versions of the Creature. Nonetheless the gist here is clear: collective working-class action is an 'irritant' and does not bring 'inner peace'.

Of more significance than the special pleading of Gaskell's intrusive narrator, twentieth-century literary criticism dwelt heavily upon the novel's alleged move from the verisimilitudes of its opening social commentary to the melodrama of a romance plot which, it was argued, then obscured the historical social reality it had so movingly depicted.¹⁸ The contradictory relationship between the universal and the particular, between social survey and novel, led to a debate dominated by questions of genre and epistemology. These were particularly influenced by Raymond Williams' judgement in *Culture and Society* (1958) that despite her original 'observer status', John Barton's murder of Harry Carson is a dramatization which encodes a middle-class fear of working-class violence and Barton's actions are a 'distortion'.¹⁹ This critical focus on genre persisted. In the mid-80s Catherine Gallagher argued that: 'In *Mary Barton* Gaskell purposely sets up false conventions for contrast, thereby calling attention to her own narrative method as the 'true' perspective. The problem is that she then has trouble fixing on any one narrative mode; the ground of the contrast continually shifts in the first half of the book while the author searches for a mode of realism adequate to her subject matter'.²⁰ Gallagher identifies 'tragedy, melodrama, domestic fiction, and finally religious homily' as amongst several alternatives.²¹ However, it seems possible that these choices were not just questions of epistemology but were, as Williams argues, wrought by her publishers Chapman and Hall with their eyes firmly fixed on the literary market-place. Her nominal shift in focus from John Barton to Mary, an emphasis moving from 'tragedy' to 'romance', was probably about prospective sales.²² Mary's predicament in which she perilously teeters on the brink, threatening to cross over from virtue to vice, was always destined to win over a reading public intrigued by 'fallen women'.

¹⁸ See Raymond Williams, *Culture and Society 1780-1950*, (1958: rep. Nottingham: Spokesman, 2013).

¹⁹ Williams, *Culture and Society*, p. 90.

²⁰ Catherine Gallagher, *The Industrial Reformation of English Fiction: Social Discourse and Narrative Form 1832-1867* (Chicago: University of Chicago Press, 1985), p. 70.

²¹ Ibid.

²² Williams, *Culture and Society*, p. 88.

From the mid-1990s, following Elaine Hadley's reassessment of melodrama as part of an aesthetic of social protest, the critical consensus moved towards a position which regarded 'the melodramatic mode' of the novel as an allegory of the social plot.²³ Thomas Recchio, for instance, used Friedrich Engels' *The Conditions of the Working Class in England* (1845) to suggest that John Barton's crime functions synecdochally. The murder is analogous, an individually equivalent response to what Engels had articulated as the 'social murder' inflicted daily on the working class by an exploitative bourgeoisie.²⁴ Problematically however whilst *Mary Barton* is clearly sympathetic about the material deprivation of the working class, as Chris Vanden Bossche has recently argued, the effective agents of social change are not the Chartists, or even worse, the Trade Unions, but the self-made, and the reform-inclined captains of industry.²⁵ Mary Barton's choice of the aspirant, social mobile, self-made 'inventor' Jem Wilson is applauded by the text. Like Job Legh, he is a rational, 'scientific', self-controlled man who plays firmly by the rules. Indeed, both Jem and Job exist firmly outside of the dichotomous class antagonism which engulfs John Barton and the Carson males. And despite her infamous disclaimer in the novel's Preface that 'I know nothing of Political Economy, or the theories of trade', Gaskell gives notable credence to the masters' claim that they cannot control the rate of wages given the global wide competition for manufacturing orders (166). So it is perhaps Mr Carson's gradual realisation which ends the novel (and his alone) that conditions must change for the workers, facilitated by a vision of a co-operative Christian brotherhood of master and worker, which is suggested as a real hope for reforming change.

For some critics, Gaskell's descriptions of the ravages of poverty which move from 'sanitary epistemology' of the type offered by the ethnographies of Kay-Shuttleworth, Engels and Mayhew, to a Gothic imaginary, are an unforgiveable re-shaping for the middle class. In what he describes as a move from 'the statistical' to 'the spooky', David Ellison detects a shift to the comfortable territory of literary allusion. Gaskell, he argues, unwittingly links, 'the imperfectly glimpsed, if not spectral bodies of the poor, the emaciations of famine and the concurrent removal of labour-traces from the spectacular display of commodities set behind glass.'²⁶ However I would argue that this suggestion, which sees poverty as re-packaged in the

²³ Elaine Hadley, *Melodramatic Tactics: Theatricalized Dissent in the English Marketplace 1800-1885* (Stanford: Stanford University Press, 1995).

²⁴ Thomas Recchio, 'Melodrama and the Production of Affective Knowledge in *Mary Barton*', *Studies in the Novel*, 43: 3 (Fall 2011) 289-305.

²⁵ Chris R. Vanden Bossche, *Reform Acts: Chartism, Social Agency and the Victorian Novel, 1832-1867* (Baltimore: John Hopkins University Press, 2014).

²⁶ David Ellison, 'Glazed Expression: *Mary Barton*, Ghosts and Glass', *Studies in the Novel*, 36:4 (2004), 484-508, p. 485.

novel for middle-class entertainment, under-reads Gaskell's depiction of working-class psychology which is actually placed firmly in a project to elicit sympathy. Rather than a 'surrender' to convention, I suggest that she co-opts gothic conventions - not to present a political manifesto - but to explore the troubled psyches of industrialisation and place contemporary notions of 'thuggery' under pressure.²⁷

How then does monomania work in Gaskell's project to elicit sympathy for the working class? If her realist sentences sought to show life as it is and lay bare what Charles Kingsley called the 'science of starving', the question as to why Barton and Esther, the human underside of an industrial city, are not afforded the same literary treatment is, as discussed, usually answered with recourse to the expectations of her readership.²⁸ Their gothic portrayal mirrors a dimly apprehended grasp by the middle class of what is essentially considered 'immoral'. But if realist characters are to be commended for perceiving the true nature of the reality which they inhabit, rather than ironically paraded for their misguided self-aggrandisement or flawed misapprehensions, Barton and Esther do appear to grasp their predicaments with a cold clarity. By claiming that their projects are monomanias, Gaskell suggests that whilst they are acutely conscious of the true awfulness of their situation, their own responses merely aggravate their 'condition' or can only effect change upon family members, rather than a wider social network. They remain 'unhealed' and in urgent need of a cure. Her monomaniacs trouble both the aesthetic structures of the novel (and the plot) by refusing to disappear and refusing to stop thinking about their problems (until their deaths/the end of the novel). This is in stark contrast to a kind of mute, fatalistic acceptance of the type conflict-averse, sickly Bessy Higgins espouses in *North and South*, which whilst allowing for the preservation of her sanity, merely results in a sentimental but futile death.

Jill L. Matus's analysis of emotional and psychic states in the novel rightly argues that working-class feelings are represented as turbulent and that Gaskell is ambivalent about their collective expression.²⁹ When feelings are translated into political violence, the text suggests rather uncontentiously that they become ugly. But Matus also argues that 'excessive' individual working-class emotion, such as John Barton's monomania and Mary's brain fever after her crisis in court, become 'pathological' because they lack 'self-control'. Here I also differ because the 'monomanias' of this novel are not orthodox. Indeed, throughout the text orthodox medicine is treated with a disdain that suggests its vacuity and contrastingly favours the working-class, herbal medicine of Alice. The idea of 'monomania', as part of a new taxonomy

²⁷ Patrick Brantlinger cites Carlyle's unsympathetic use of the word 'thuggery' to describe the worst symptoms of working-class distress and trade union violence in *Chartism* (1839) as indicative of the limits of middle-class concern.

²⁸ Charles Kingsley, 'Review of Mary Barton', *Fraser's Magazine*, April 1849, pp. 428-432, 432.

²⁹ Jill L. Matus, 'Mary Barton and *North and South*', p. 30.

of ‘mental disease’, is roundly dismissed when she points out that the working class do not have the ‘leisure’ time to think of such things. Instead, I would argue that their ‘monomanias’ are in fact perfectly sane. Gaskell pointedly links Barton’s emotional crisis to his crushing material circumstances, just as Esther’s ‘monomaniacal’ mission is fuelled by a mixture of shame and familial love. We are given a detailed aetiology in both cases which presents their responses as well within the bounds of reason – albeit in Barton’s case ‘misguided’ and ‘a thing apart’. Whilst the lack of a disciplined will might ‘infect’ the mob, who in Matus’s phrase might come to look disconcertingly ‘French’, individual, ‘domestic’ members of the working class are shown to be at great pains to control their feelings, whether through self-medication, sheer will or singular endeavour. *Mary Barton* does not fundamentally question the capitalist system (here she is not Engels) but it does implicitly urge urgent reform, especially in the havoc wrecked by the system emotionally. Whilst the medical profession and the bourgeoisie might favour a taxonomical, clinic distance from the severe distress associated with poverty, what they were really contending with, Gaskell’s interrogation shows, was a situation in which they were profoundly implicated.

The novel’s ending sees John and Esther ghoulishly buried together in the same grave without names or dates. Where John had died in a tableaux of reconciliation in Mr Carson’s forgiving arms, Esther’s ‘glittering eyes’ manage to see her back into the family home before she expires clutching a locket of her dead child’s hair. Their uninscribed existences echo the ineffectual consciousness of their plights. Their monomanias do not fit a conventional therapeutic model of crisis and cure because their plights have not materially changed. Whilst their deaths are tinged with a Victorian sentimentalism, the gothic amplification of their psyches ensures that a Christian resolution to the novel feels rather jarring and is thus necessarily quickly superseded by Mary and Jem’s hasty exit to Canada and the pursuit of a better life in a healthier environment. Keen to capitalise on the topicality of her subject matter in ‘the Year of Revolution’, Gaskell urged her publishers, Chapman and Hall, to make haste with the novel’s anonymous release. Its portrayal of monomania sits on a rising arc of popular usage, still aligned in the novel with an excess of emotion, but uniquely locating its causes as poverty and destitution. In that regard Gaskell’s novelistic monomania comes closest to reflecting the causes given in admission notes for the burgeoning populations of County Asylums required by statute from 1845: commonly worklessness, ‘seduction’, or intemperance.

Chapter Two: Monomania as modernity: Romantic love in *Wuthering Heights* (1847), *The Tenant of Wildfell Hall* (1848) and *Shirley* (1849)

As Elizabeth Gaskell's *Mary Barton* was encoding monomania to compel sympathy by fashioning it as the product of a pathogenic environment, meanwhile the Brontë sisters trialled its association with the middle-class melancholia of the Romantic hero. The dark singular brooding brought on by the unsatisfied longings of romantic love might be restyled and upgraded with a new modern illness. This chapter considers the resultant discursive clash between these heroes and their respective diagnosticians: Heathcliff and Nelly Dean (*Wuthering Heights*), Gilbert Markham and Fergus Markham (*The Tenant of Wildfell Hall*) and Sir Philip Nunnely and Shirley Keeldar (*Shirley*). With the exception of *Villette* (1853), which I discuss in the next chapter, monomania is given characteristically short shrift in Brontëan fiction as part of an unwelcome modernity. Still jostling for ascendancy in the asylum, the moment of crossover from melancholy to monomania is nonetheless toyed with in this trio of examples. Heathcliff, Gilbert Markham and Sir Philip Nunnely are all versions of middle-class masculinity, variously brooding and besotted. Lacking self-awareness as to their apparently self-destructive romantic loves, they are all accused of falling prey to a monomania. But its attendant associations of working-class lunacy ensure that it is framed as an unreliable diagnosis (at least in the cases of Heathcliff and Markham), as it falls short of melancholy's more cerebral, poetic connotations.

1.1 Heathcliff

Unlike *Villette*, with its painstakingly reasoned endorsement of Protestant stoicism, mild-mannered, cautionary prescriptions on behaviour find their antithesis in *Wuthering Heights* (1847). In fact amidst the brutality and ill manners, the only overtly religious character, the consistently grim Joseph, does not counsel 'self-control' but rather delivers ranting Calvinistic predictions of everlasting damnation upon his fellows, however they choose to conduct themselves. Amidst its generic and discursive clashes; its Blakean vision of hell and Gothic hyperbole, its anti-foundling narrative, its insistent Northern dialect and mockery of Southern effeteness, *Wuthering Heights* makes scant mention of orthodox, medical interventions. The local doctor from Gimmerton, Dr. Kenneth is, perhaps unsuitably for a doctor, a drinking

friend of Hindley's characterised by his perfunctory and ineffectual visits to the ailing. For instance, he visits Catherine when, brought on by Heathcliff's disappearance, her first illness, a visible 'brain' fever attended by 'delirium', signals the urgency and 'truthfulness' of her feelings. Using heroic medicine, Kenneth bleeds her, recommends a diet of 'whey and water gruel' and suggests that Nelly should guard against her '...throwing herself down the stairs, or out of the window', followed by his swift exit, 'for he had enough to do in the parish'.¹ Overworked, resolute and clipped, the tenor of this medical intervention is pure gothic with the heaping of physical deprivation upon the patient in the form of prison rations and blood-loss, echoing the mental deprivation of Heathcliff's absence.

It is in the novel's penultimate chapter, just before his own self-starvation and death, that Nelly Dean (ostensibly speaking to Lockwood) recalls a conversation with Heathcliff in which he describes the singularity of his obsession with Catherine Linton née Earnshaw:

[...] it is by compulsion that I do the slightest act not prompted by one thought, and by compulsion, that I notice anything alive or dead, which is not associated with one universal idea ... I have a single wish, and my whole being and faculties are yearning to attain it (289).

Such uncharacteristically confessional speech from Heathcliff before his death is preceded by Nelly Dean's revelation that whilst she failed to anticipate the severity of his illness, she would have diagnosed him with monomania.

[...] though he was neither in danger of losing his senses, nor dying; according to my judgement he was quite strong and healthy; and as to his reason, from childhood he had a delight in dwelling on dark things, and entertaining odd fancies – he might have had a monomania on the subject of his departed idol; but on every other point his wits were as sound as mine (288).

That the text should simply clarify and diagnose Heathcliff's state of mind and offer a neat medical exposition just before his death assumes a reverence for medical discourse which this text manifestly lacks. Dr. Kenneth is at a loss to know what he died from. But accessing a newly available quasi-medical lay opinion, Nelly's oral narrative pontificates upon the partial nature of any supposed insanity, such that on the whole his wits are 'sound'. Alyson Kiesel rightly argues that her offhand diagnosis 'dramatizes the difficulty in diagnosing monomania'.²

¹ Emily Brontë, *Wuthering Heights*, ed. by Ian Jack with an Introduction and additional Notes by Helen Small (Oxford: Oxford University Press, 2009) p. 78. Future page references are to this edition, and are included in parentheses in the text.

² Alyson J. Kiesel, *Reality Defects: Monomania, Nostalgia, and Trauma in Victorian Writing* (unpublished doctoral thesis, New York University, 2010), p. 18. Kiesel's first chapter on 'Attention' considers monomania in relation to

I would add that Nelly's observation of his 'monomania on the subject of his departed idol' parodies her as a voice given to clichéd attitudes and hand-me-down nostrums: here is a grief which medical convention dictates has gone on for too long and been experienced too deeply. However her unreliability is confirmed by her own self-confessed failure to see his oncoming death.

Heathcliff's love refuses the limitations of Nelly Dean's imagination. And because the novel is not ethically mediated and there is no intrusive authorial judgement, the reader is free to regard Heathcliff as a romantic hero despite his violence towards Isabella and his avaricious lust for revenge. His love for Cathy is crafted as timeless, excessive and remorselessly gothic: a purely reductive label of 'monomania' might strike the reader might as dissonantly inadequate. Elsewhere (and in an uncomfortable contradiction to Nelly's 'medical' exposition) her narrative also insists on his supernatural alterity and the very ghoulis nature of his final demise. His Coleridgean 'glittering restless eyes' and grinning death-stare are all realised in the dimly lit, heavily gothicised interior. Coupled with his underscored, rude physical health, that Nelly should characterise his love for Cathy as 'a monomania' signals the very beginnings of its use as a trope of clinical gothic. By this I mean that 'monomania' is used in a medical sense by Nelly to account for his curious behaviour, whilst that behaviour is simultaneously conveyed with a Gothic literary aesthetic. I would argue in *Wuthering Heights*, 'monomania' is yoked with 'supernatural', transgressive emotion, to suggest Heathcliff's internal agony and the fathomlessness of his passion. This incomprehensibility serves to affirm erotic desire.

Graeme Tytler theorises that Emily Brontë depicts Heathcliff's 'anachronistic' (because the action is set in 1801-2) monomania in 'realistic detail'.³ It is true that he 'sees' Cathy everywhere: she is his singular thought. His determination to be connected to her after her death, not only via his proximate burial, but also in a spiritual, supernatural sense might arguably signal the onset of a mental illness. Tytler argues that she becomes an 'ineluctable physiognomical presence' in both Catherine and Hareton's features such that he cannot bear to be near either of them as they trigger his monomania.⁴ Similarly, the following passage from Esquirol's *Mental Maladies* on erotomaniacs might be considered an apt comment on Heathcliff's characterisation:

Like all monomaniacs, those suffering from erotomania, are pursued both night and day, by the same thoughts and affections, which are the more disordered as they are

Wuthering Heights, *Lady Audley's Secret* and *He Knew He Was Right* arguing that it also influenced a style of reading in which the reader looks for one answer, and then a style of narration which privileges one version of the truth.

³ Graeme Tytler, 'Heathcliff's Monomania: An Anachronism in *Wuthering Heights*', *Brontë Society Transactions*, 20:6 (1992), 331-343.

⁴ *Ibid.* p. 337.

concentrated or exasperated by opposition. Fear, hope, jealousy, joy and fury, seem unitedly to concur, or in turn, to render more cruel the torment of these wretched beings. They neglect, abandon, and then fly both their relatives and friends. They disdain fortune, and despising social customs, are capable of the most extraordinary, difficult, painful and strange actions.⁵

However, as I have argued, the notable feature of this passage from *Mental Maladies* is actually its generality: observing that people behave rather strangely when besotted is hardly anything new. And this is especially so when the observation is made of a carefully-crafted Byronic anti-hero. Psychological discourse, indeed medical discourse, is scant in *Wuthering Heights* because it is part of an encroaching modernity which the text repeatedly resists. Whilst Nelly Dean may be duped by fashionable, medical jargon, the reader is encouraged to question it. Just as Emily Brontë ‘resolutely’ maintained that no doctor should attend her during her consumption and would ‘scarcely allow her illness to be alluded to’, her fiction imparts the same disregard for medicine.⁶

1.2 Gilbert Markham

In Anne Brontë’s *The Tenant of Wildfell Hall* (1848) it is Fergus Markham, Gilbert Markham’s mischievous younger brother, who ridicules Gilbert’s love for Helen Huntingdon as a ‘monomania’ in a post-breakfast, drawing-room scene. Having arrived to ostensibly call upon his sister, Rose, the venomous Eliza Millward, whose affections Gilbert has spurned, takes the opportunity to impart the ‘startling intelligence’ that ‘Mrs. Graham’ (her earlier assumed name and used quite deliberately by Eliza) has returned to her debauched husband, Arthur Huntingdon. This follows the middle section of the novel which offers Helen’s diary account of the moral decline of her husband which had caused her to leave him; at the time, a scandalous choice. Although she has in fact returned to Arthur only to act as a medical attendant during his last physical sufferings before death, Eliza Millward is careful to frame this return as a romantic reconciliation in order to wound Gilbert. The mention of Helen’s name prompts Fergus’s remark, which Gilbert narrates:

‘Hush-sh-sh!’ whispered Fergus, in a tone of solemn import. ‘We never mention her name; her name is never heard’. And glancing up, I caught him with his eye askance on me, and his finger pointed up to his forehead; then, winking at the young lady

⁵ *Mental Maladies*, p. 336.

⁶ *The Letters of Charlotte Brontë with a Selection of Letters by Family and Friends*, ed. by Margaret Smith, 3 vols (Oxford: Oxford Clarendon Press, 2000), II, p. 145.

with a doleful shake of the head, he whispered – ‘a monomania’ – but don’t mention it – all right but that.⁷

Fergus is established early on in the narrative as mocking and derisory by the way he teases his mother and sister about their disproportionate interest in the newly arrived tenant, ludicrously suggesting that the mysterious Mrs. Graham might turn out to be a ‘witch’ and pleading sarcastically with his sister to ascertain just ‘[...] how much sugar she puts in her tea’ (14). Whilst he finds his own jokes screamingly funny, nobody else laughs. His allusion, ‘We never mention her; her name is never heard,’ is a reference to the mournful ballad by Thomas Haynes Bayly (1797-1839) ‘Oh no! We never mention her’. Its inclusion serves to establish Fergus’s frivolous tone of mock-solemnity. As the novel works using a three part form, the first of which is narrated by Gilbert Markham, we see the development of his ardour for Helen Graham which is inversely related (and therefore all the more romantic) to her own plummeting reputation. At the point at which Fergus’s remark is made (in the third section also narrated by Gilbert Markham in a series of letters to a friend) the reader will understand it as belittling and unfair. Indeed the irony in describing Gilbert Markham’s love as a monomania is that, with the exception of his fit of jealousy at the misunderstood affections of Helen’s brother, Frederick Lawrence, he has been a comparative model of restraint.

This is particularly so in the light of the novel’s second part narrated by Helen revealing her past with Huntingdon. This details the central concern of the novel which is middle-class intemperance. Any reference to a ‘monomania for drunkenness’, which was an original feature of Esquirol’s category, is absent. This suggests either its already discredited use as a term for intemperance, or more possibly its rather unpopular framing of addiction as a compulsion or partial insanity rather than a sinful moral choice. ‘Alcoholism’, a word coined in 1852 with its associations of disease, superseded ‘monomania for drunkenness’ but was not part of popular (or medical) discourse at the time of the novel’s publication.⁸ Nonetheless Anne Brontë’s novel de-glamorises the normalisation of excessive male drinking. Arthur Huntingdon is a man ‘without self-restraint’ and ‘given up to animal enjoyments’ whose ‘perverted nature’ has allowed him to cultivate a liking for vice.⁹ Whilst this leads to a dependence on alcohol, it is still couched in the language of choice:

In this time of weakness and depression he would have made it his medicine and support, his comforter, his recreation, and his friend, - and thereby sunk deeper and deeper – and bound himself

⁷ Anne Brontë, *The Tenant of Wildfell Hall*, ed. by Herbert Rosengarten (Oxford: Oxford University Press, 2008) p. 357. Future page references are to this edition, and are included in parentheses in the text.

⁸ See Roy Porter, ‘The Drinking Man’s Disease: The Pre-History of Alcoholism in Georgian Britain’, *Addiction*, 80:4 (1985) 385-396.

⁹ *Ibid.* p. 206, 277.

down for ever in the bathos whereinto he had fallen. But I determined this should never be, as long as I had any influence left (220).

Both Huntingdon's graphically articulated depravity and the medical consequences of his drinking are conveyed in Helen's 'diary'. He also repents his behaviour with his approaching death. Anne Brontë is therefore specific in her didactic message to warn of the perils of drink, and also offers her readership a broader narrative curative which warns against male self-centredness and female self-effacement.

As with Nelly's domestic 'surgery' in *Wuthering Heights*, the intrusion of a 'formal' diagnosis and the co-opting of nosology in *The Tenant of Wildfell Hall* is left conspicuously to the medically unqualified and framed as an aside. Fergus leans symbolically on the family hearth and delivers his buffoonish diagnosis in a thoughtless betrayal of his brother's affections to the very woman whom Gilbert has spurned. Characterised by their diagnosticians as petulant and rash, both Heathcliff and Gilbert Markham make unconventional romantic choices which offend domesticity by having little to do with the marriage 'market'. Drawn to a woman far richer than himself Markham is economically emasculated and virile only when marriage restores him to full property owning supremacy. In Heathcliff's case, his scheme of economic revenge is imbued with purposeless spite in the face of Catherine's death. The asides Nelly Dean and Fergus Markham deliver are not intended to question the sanity of those they apparently hold dear, but rather to question the appropriateness of emotional behaviours which shun the orderly maintenance of propriety and patriarchal domesticity.

However, in both cases the over-arching narrative privileges the romantic projects of its male protagonists, thereby undermining their amateur pathologization. Whilst the footnote in the OUP edition of *The Tenant of Wildfell Hall* records monomania as 'any kind of obsession by the 1830s' I would argue that, at this point, the connotations are different to the twentieth century coinage of the more benign word 'obsession' (438). Markham's 'monomania' is preceded in the text by his foreshadowing realisation that he is regarded by all as 'madly infatuated by the seductions of that unhappy lady' (350). Made miserable by the unfavourable judgement made against her by his family he confesses to being 'morose' and 'misanthropical' (350). This version of monomania is inextricably linked by Anne Brontë to a melancholic love-sickness which the younger generation of the novel, represented by Fergus, reject as mock-tragic and laughable, but which the text reasserts as justified. The attempted dismissal of masculine romantic sufferings as monomanias may be read as an ironically self-reflexive comment on the courtship novel, but overall both *Wuthering Heights* and *The Tenant of Wildfell*

Hall reject the word as all too modern and assiduously maintain their predilection for an increasingly old-fashioned melancholy.

1.3 Sir Philip Nunnely

Demonstrating how individual psychologies are at play in wider political narratives, Charlotte Brontë uses the symptomatological language of monomania in relation to a number of characters in *Shirley*, a novel set in the depression of 1811-12 following the Napoleonic Wars. For instance, Caroline Helstone worries that Robert Moore's unyielding attitude to his Luddite workers means that '...certain ideas have become too fixed in [his] mind'.¹⁰ However the diagnosis is explicitly mentioned in *Shirley* to characterise Shirley Keeldar's suitor, the wealthy baronet, Sir Philip Nunnely and is not used, in contrast to Elizabeth Gaskell's *Mary Barton*, to characterise the angry, rioting workers at Moore's mill. Nunnely is part of the novel's subplot: Shirley's romance with Louis Moore.

Louis is a poor tutor and she is a woman of property who will eventually enable his advancement. Running counter to the novel's opening warning to the reader that 'something real, cool, and solid, lies before you; something unromantic as a Monday morning', which reminds us that this is a novel about the organisation and undertaking of work, Shirley's relationship with Louis is an erotically charged game of emotional concealment (5). Tutor to the crippled schoolboy Henry Symptom, Shirley's cousin and 'pet', Louis has a privileged access to Shirley's emotions via Henry's verbatim repetitions of their intimate conversations, and Henry in turn voices the adoring love for Shirley that we suppose his teacher is hiding. As Shirley's former teacher he is also positioned as the only character in the novel able to claim a benevolent superiority over her (a power dynamic close to Charlotte Brontë's heart), but given his material inferiority he muses that:

[...] it is well for a Sir Philip Nunnely to redden when he meets her eye: he may permit himself the indulgence of submission – he may even without disgrace suffer his hand to tremble when it touches hers; but if one of her farmers were to show himself susceptible and sentimental, he would merely prove his need of a strait waistcoat (422).

Juxtaposed with her first unsuitable admirer, Samuel Fawthrop Wynne, who has 'blunt' feelings and 'coarse' tastes which propel him to read 'only a sporting paper' and nothing else, Nunnely is set up as a stereotype of posing refinement and sensitivity and is also the most eligible bachelor of the district (393). In the wider narrative he plainly functions as a foil for Louis Moore given their disparities in wealth and status. Because Louis is largely

¹⁰ Charlotte Brontë, *Shirley*, ed. by Herbert Rosengarten and Margaret Smith (Oxford: Oxford University Press, 2007), p. 62. Further page references are to this edition, and are included in parentheses in the text.

absent from the narrative, and appears as a near physical clone of his brother, Robert, the narrative needs to supply a compelling reason for Shirley to find him attractive. Her contrary choice of a relatively poor man (underscored by the offers she turns down from these far wealthier men and underscoring her own liberating wealth), is a choice based on his 'emotional' temperament which is neither too 'blunt' nor too refined. Louis is thus positioned as the third, but correct, choice for Shirley.

Nunnely is characterised by the omniscient narrator through free indirect discourse which accesses Shirley's perspective. Having met at 'the fashionable watering-place of Cliffbridge' his literary pretensions are a source of 'mortification' for her: he whips out his 'long' sonnets on 'moonlight walks' and recites them in 'sequestered rustic seats' with a 'voice tremulous with emotion' (396). Unfortunately they make Shirley wince: 'Often she tried, as gently as might be, to wean him from this fanatical worship of the Muses: it was his monomania – on all ordinary subjects he was sensible enough; and fain was she to engage him in ordinary topics' (396). Thus drawn as over-blown, an ill-fated suitor with a penchant for badly penned verse, his monomania is 'his single foible', not a serious psychiatric disorder (396). Like Phillip Wakem's overly-sentimental wooing of Maggie Tulliver in the Red Deeps in *The Mill on the Floss* (which I discuss in Chapter Five) in which he attempts to educate a woman who is constructed with a superior intelligence on the right choice of reading material, Nunnely's patronising assumption of superior literary accomplishment proves to be disastrously ill-conceived. Significantly, he proposes marriage to Shirley at Nunnely Priory, his ancestral home, but just as his promise of wealth, land and 'connections' fail to secure her as an object of exchange, his self-indulgent assessment of his own poetry and its seductive potency become an echo of such hubris.

The activity of reading aloud as a displacement for seduction is continued via an implicit contrast with Louis Moore's modest but erotically charged school-room recitations of French tragedy (*Le Songe d'Athalie* from *Athalie* by Jean Racine) and *Le Chêne et le Roseau* by Jean de la Fontaine, a fable about pride and humility in which the humble reed bends with the wind but the mighty oak falls, meant to encourage Shirley's own humility. During this lesson 'a simultaneous feeling seized them' and 'their enthusiasm had kindled to a glow' (413). However such feelings are cut short by the return of Nunnely and Shirley's uncle, Mr. Sympson from a walk, prompting the couple's hurried, guilty exit from the school-room by different doors. This confirms Nunnely as a slightly farcical, semi-comic interloper. Shirley's eventual refusal to marry him and submit to her uncle's fiscally underpinned authority flouts the rules of the marriage market; - it is portrayed as the braver and wiser choice. Unlike the monomanias of Heathcliff and Gilbert Markham which, as I have argued, are endorsed as the residual of a

romantic melancholy, poetaster Nunnely is spurned for a showy excess and a vainly assumed talent. Whilst madness has always been commonly associated with poetic genius, here the connection is turned upside down.

Aside from its off-stage Luddite rebellion, in the world of domestic, personal politics *Shirley* anticipates *Villette*. Shirley's governess, Miss Pryor, is told unsparingly by a former employer that she should 'cultivate the profound humility befitting [her] station, or [her] mind would very likely 'go to pieces' on the rock that wrecked most of [her] sisterhood – morbid self-esteem; and that [she] should die an inmate of a lunatic asylum' (316). Similarly, her former pupil informs her that she has 'the sin of pride' (317). This harsh treatment of employed but isolated young middle-class women, offers a cautionary tale for Caroline Helstone who is considering teaching as an escape route. The fuller, agonised insights of *Villette* are also pre-figured in Caroline Helstone's apparently unrequited love for Robert Moore. Her painful awareness of his proximity, which dictates the carefully calibrated positioning of her body to hide the 'traitorous symptoms' of a fierce, obsessive love only serves to foster the 'aching languor' of her condition. Meanwhile: 'None could affirm that she had trembled or blushed, that her heart had quaked, or her nerves thrilled: none could prove emotion: a greeting showing less effusion was never interchanged' (208). It is this policing of her body which causes her later illness.

However in *Shirley* Charlotte Brontë's specific treatment of monomania is very different to the frenzied longings of Lucy Snowe, for here it is part of a comedy which ridicules the landed gentry. Similar to Gaskell's later novel *North and South* (1854-55) in its endorsement of England's mill-owning captains of industry (who learn a lesson about their factory hands), *Shirley* finds its masculine paragons steeped in the virtues of self-control, quiet dynamism and buttoned-down emotion. By contrast, Sir Philip Nunnely's poetry writing is an embarrassing effusion of emotion, an aristocratic foible which lets the reader know that he is blissfully unaware of his own grandiosity. His monomania betrays a lack of self-awareness and, diagnosed by the exacting Shirley Keeldar, his futile attempts to control her judgements of literature prove to be his decisive undoing. Here the reader is positioned as Shirley's confidante and we are led to sympathise with her implicit desire for a modern man who is her intellectual match. The monomaniacs of Heathcliff and Gilbert Markham by contrast retain a residual sense of melancholic longing. Their diagnosticians, Nelly Dean and Fergus Markham are, at once, plainly unreliable and unfair in their cynical mockery and dismissal of romance.

Chapter Three: Protestant perseverance to treat monomania in *Villette* (1853)

And in catalepsy and a dead trance, I studiously held the quick of my nature.¹

In this chapter I examine the framing of heightened emotion in Charlotte Brontë's *Villette* (1853) and consider how glimpses of Lucy Snowe's 'monomaniacal' passion disrupt her more usual, outwardly silent demeanour. Departing from earlier readings which interpret her vaguely drawn background and the marked lack of exposition regarding her family as signalling a physiognomic outlook or undisclosed trauma, I argue that the novel's form suggests Lucy Snowe's status as a 'blank' without any relationships based on meaningful reciprocity.² Her desperate attachment to Dr. John Graham becomes a self-diagnosed monomania needing treatment. Not quite a foundling narrative, but likening herself early on to pilgrims Christian and Hopeful, Lucy Snowe's narrative is imbued with a religiosity which resists the cures of the clinic.³ Lacking companionship, I argue that in its stead she relies on a Protestant code of self-reliance and management of emotion, typified by Priscilla Maurice's *Sickness: Its Trials and Blessings* (1850), which *Villette* is reluctant to question. The treatment of life's ills via perseverance and endurance, in a text so keenly focused on interiority and the subjectivity of personal struggle, is fiercely endorsed. Brontë crafts her heroine with excoriating self-awareness and the first to 'diagnose' any deviation from such perseverance is Lucy herself. Used in this way, medical discourse is parodied and Lucy is its most adept practitioner. She uses monomania to describe Paulina Home, one of her illustrative antagonists. Paulina's apparently simpering adulation of male authority figures revolts Lucy, deviates from a code of self-reliance and is therefore pathologically odd. When she later betrays her own feelings towards Dr. John Graham, in a climactic attic scene which echoes Bertha Mason's notoriously insane manifestation in *Jane Eyre* (1847), Lucy is equally unforgiving towards herself, upbraiding her own behaviour as an undignified, shameful monomania. However unlike the effusive Sir Philip Nunnely in *Shirley* whose blind spot is the

¹ Charlotte Brontë, *Villette*, ed. by Margaret Smith and Herbert Rosengarten, with Introduction and Notes by Tim Dolin (Oxford: Oxford University Press, 2000), p. 109. Subsequent page references are to this edition and appear in parentheses in the main text.

² See Nicholas Dames, *Amnesiac Selves: Nostalgia, Forgetting, and British Fiction 1810-1870*, (Oxford: Oxford University Press, 2001).

³ *Villette*, see footnote 6, p. 497. This early reference to John Bunyan's *The Pilgrim's Progress* establishes what Dolin calls 'the crucial motif of the Protestant heroine's spiritual journey'.

seductive potency of his poetry, Brontë's heroine is meticulously observant: any sense that she has been too expressive can only be read ironically.

As a starting point for my analysis of Lucy's monomania I consider Sally Shuttleworth's argument that *Villette* enacts the rhetoric of nineteenth-century mind science through the emblematic Dr. John Graham Bretton and also through the heroine's knowing use of medical discourse.⁴ The text's repeated concern with facial hermeneutics mirrors Lucy's defensive refusal to surrender herself to the potentially humiliating and objectifying evaluation of the three 'surveillants' Shuttleworth identifies: Dr. John (using medical science), Madame Beck (using rigid industrial control) and Père Silas (using Roman Catholicism). Charlotte Brontë is demonstrably willing to confront, indeed attack, these agents of social control. In order to 'unveil' Lucy's inner secrets, Lavatarian physiognomy (which blended religiosity and science) is used as a diagnostic tool.⁵ Disclosure on the face has become a terrible weakness. But Lucy's relentless maintenance of a dispassionate bodily surface sealing her inner life, enabled by her Protestantism, actively rebels against the medical profession's attempt to diagnose her.

1.1 Learning to persevere at the Parsonage

Only nervous! Why, what can be said more hopeless? What does it mean? Oftentimes it means that the pain is not understood, and that the physician sees no cause for it; and as he must give it some name, he calls it nervous. The sting of it lies in those words having a double meaning. Used by some persons, they are meant to express intense suffering. Used by others, they mean the figments of a diseased imagination.⁶

These words are taken from Priscilla Maurice's anonymously published, best-selling book of devotional exercises, *Sickness: Its Trials and Blessings* (1850), which now sits displayed in a glass cabinet in what was once Charlotte Brontë's bedroom at the Haworth Parsonage. This text belonged to a wider, popular genre of devotional literature for the ill, with titles such as *Comfort for the Afflicted* and *Hymns and Poems for the Sick and Suffering*. One contemporary reviewer commented that even though 'thousands of the same sort have preceded them,' works of this

⁴ Sally Shuttleworth, *Charlotte Brontë and Victorian Psychology* (Cambridge: Cambridge University Press, 1996) see Chapter 10: '*Villette*. The surveillance of the sleepless eye'.

⁵ Johann Caspar Lavater's pseudo-scientific system which taught how to judge character by examining the countenance was elaborated in *Essays on Physiognomy* (1781-1801). Arguably his influence was such that the Victorian public, consciously or otherwise, acquired the cultural habit of perceiving and 'reading' faces as physiognomical types. In particular his essays contain many observations on 'National Physiognomy' which reinforce tired stereotypes.

⁶ Priscilla Maurice, *Sickness: Its Trials and Blessings* (London: Francis and John Rivington, 1850) p. 100. Charlotte's copy of this text was purchased by the Brontë Society in 2014 from a collection amassed by a local Brontë enthusiast.

type were ‘sound, earnest, practical’.⁷ Alongside Patrick Brontë’s now well-known annotated copy of Thomas John Graham’s *Modern Domestic Medicine* (1826) which offered the reader an entry into the world of medical science, *Sickness* also gave a new self-empowerment: illness here is fully fashioned not just as a trope of purification, but also as experiential; a test of endurance with a careful index of attendant epiphanies. In some ways, a godly forerunner to the archetypal secular guide on self-improvement, Samuel Smiles’s *Self-Help with Illustrations of Character, Conduct, and Perseverance* (1859), Priscilla Maurice’s book helped to embed the assumption that Protestantism required an active policing of emotion and a dutiful watch on the body from its adherents. With deep roots in fearful bourgeois sentiments aroused by the bloody excesses of post-revolutionary France, the moderation of conduct had enjoyed wide appeal for some time, but now it was also a widely advertised, lucrative publishing venture. Whether young or old, healthy or sick, advice for the genteel poor and aspirant middle class enabled them to set about improving their ‘character’.

Common to the motivational literature of our own times, *Sickness* offers declarative sentences, imperative verbs, pithy adages and a loose structure to its readers for serendipitous inspiration. Centrally, it counsels on the management of one’s passions and the ‘Duties and Responsibilities of Sickness’, with practical chapter headings such as ‘Longings’; ‘Fancies about Food’; ‘Taking Opiates’; ‘Relative Trials: The Family and Friends’ and ‘Medical Advice and Medical Visits’.⁸ In this last chapter the reader is advised that asking to see a new physician is a great ‘risk’ for ‘his advice may not suit you at all, it may merely add to your suffering’.⁹ Similarly, the patient is advised not to ‘trouble your physician with questions about his opinion of your state, the nature of the disease, or its probabilities’, particularly as, ‘one more trial a long illness frequently brings – medical men grow weary of the case’.¹⁰ Alongside nurses and attendants, whose proximate resentment at your burdensome condition may cause ‘breathlessness’, the medical profession does not emerge as either compassionate or consoling. Instead, the ‘Lessons which various Illnesses are meant to teach’ are a paradoxical blend of ‘trial and blessing’ to be both endured and savoured.

The author of *Sickness*, Priscilla Maurice, was one of seven sisters to the celebrated Frederick Denison John Maurice (1805-1872); liberal theologian, chaplain at St. Guy’s Hospital, friend of Tennyson and co-founder of the Christian Socialist movement. He was

⁷ Anon., ‘Literature’, *Morning Post*, 19 May 1853, p. 3.

⁸ This is the sub-heading of part (iii) of *Sickness*. The seven parts are: (i) Manner of Looking Upon Sickness; (ii) Trials and Temptations of Sickness; (iii) Duties and Responsibilities of Sickness (iv) The Blessings of Sickness; (v) Miscellaneous; (vi) Convalescence; (vii) Death.

⁹ *Sickness*, p. 171.

¹⁰ *Sickness*, pp. 175-176.

also Charlotte Brontë's 'favourite' preacher, and when she visited London in June 1851, having heard many preachers, she wrote that given the choice it would be Maurice's ministry she would frequent.¹¹ Rosemary Clark-Beattie's work on the fervent anti-Catholicism of *Villette* argues that Lucy Snowe's 'non-sectarian Protestantism' reflects the Broad Church values of thinkers like F. D. J. Maurice in which Christianity consists almost entirely in the belief of an omnipotent and loving God who will redeem all sinners.¹² Whilst this position rejects Calvinism, it accords little importance to any other differences of belief. According to Marion J. Phillips, three characteristics emerge from Maurice's sermons of 1851 (which were later elaborated in his *Theological Essays* (1853)): his liberalism, his belief in universal salvation and his 'slippage away from transcendent spiritual values towards the value of an autonomous self'.¹³ He preached the value of endurance, not merely as passive faith, but as a self-supporting divine manifestation of the power of good. Phillips argues that this 'self asserting self', inspired by Maurice, is 'at the heart of [Brontë's] opus'.¹⁴

When Lucy is challenged by the Roman Catholic Père Silas about her apparently indifferent and indiscriminate attendance at Presbyterian, Lutheran or Episcopalian chapels, she replies: 'Now, it happened that I had often secretly wondered at the minute and unimportant character of the differences between these three sects-at the unity and identity of their vital doctrines: I saw nothing to hinder them from being one day fused into one grand Holy Alliance, and I respected them all, though I thought that in each there were faults of form; incumbrances, and trivialities' (419). When Monsieur Paul finds Lucy inscrutable, it is this 'panoply' of Protestantism that he blames, referring to it as her 'strange, self-reliant, invulnerable creed' and, more explicitly he finds that in her 'terrible, proud, earnest Protestantism, there is the danger' (417).

Like Charlotte Brontë, Priscilla Maurice's life was punctuated by sibling deaths. Although the format of *Sickness* is repetitive, its stoicism and promotion of a resourceful, self-reliant, patient who endures and perseveres, captures an important middle-class, Victorian moralism which offers a counter-narrative to the patient as a passive consumer of medical science. This no-nonsense scepticism towards contemporary medical science may have struck a consoling chord with Brontë. Maurice's advice on 'nerves' for example, with which this section opens, articulates her reserve about medical diagnoses. She argues that a diagnosis of

¹¹ Marion J. Phillips, 'Charlotte Brontë's Favourite Preacher: Frederick Denison John Maurice (1805-1872)', *Brontë Society Transactions*, 20:2 (1990), 77-88, p. 77.

¹² Rosemary Clark-Beattie, 'Fables of Rebellion: Anti-Catholicism and the Structure of *Villette*', *ELH*, 53:4, (Winter 1986), 821-847, p. 822.

¹³ Phillips, p. 82.

¹⁴ Phillips, p. 86.

‘nerves’ might act as a professional catch-all, something to offer the patient in the absence of anything else. And, she complains, ‘nervousness’ might imply several things: complaints which are ‘the figments of a diseased imagination’, either considered wilfully made-up or delusory, or alternatively the ‘intense suffering’ of some for which a diagnosis of ‘nerves’ seems to understate matters. Evidence of a sceptical disregard for doctors at the Haworth Parsonage is well known. As I discussed in the preceding chapter Emily Brontë’s *Wuthering Heights* (1847) makes scant mention of orthodox, medical interventions aside from the local doctor from Gimmerton, Dr. Kenneth, a drinking friend of Hindley’s characterised by his perfunctory and ineffectual visits to the ailing.

Such professional complacency might explain Patrick Brontë’s heavily annotated copy of Thomas John Graham’s *Modern Domestic Medicine* (1826) and it certainly demonstrates the Brontë family’s own urgently felt need to self-diagnose illness. Part of a popular tradition, *Modern Domestic Medicine* is also in many ways sceptical about the wider medical profession. It is a de-mystifying text, imparting what has been called a ‘therapeutic nihilism’ in which the futility of much ‘medicine’ is compared to nature’s superior healing process. Reverend Brontë, will nonetheless, have been expected by his Parishioners to be conversant with current medical opinion, endorsing what has been called, ‘the teamwork of doctor and clergyman as co-defenders of body and soul’.¹⁵ Graham omits partial insanity and monomania from his section on ‘Insanity’, despite citing the work of Pinel and the Salpêtrière. He writes; ‘There are two states of insanity, and in reality but two’; these he identifies as mania and melancholy.¹⁶ Coupled with this unequivocal endorsement of the traditional ‘two states’ model of insanity, Graham’s omission betrays suspicion about the innovations of his French colleagues. Patrick Brontë’s annotations on this section indicate that he gave it close scrutiny. His handwritten note on *delirium tremens* (which Graham had also omitted) suggests that witnessing Branwell’s withdrawal from alcohol, with its accompanying auditory, visual and tactile hallucinations, will have encouraged the family’s critical interest in mental nosology.

The shift in the 1820s and 30s from previously orthodox demarcations of insanity, such as the ‘two states’ model which Graham endorses, towards an understanding of mental illness bound to the ‘norms’ of emotional behaviour urgently required a physiological basis in order to convince. Throughout the mid-century this was only very sketchily outlined. In his delineation of monomania Esquirol writes loosely of ‘brain lesions’ but there is a paucity of

¹⁵ Janis Caldwell, *Literature and Medicine in Nineteenth-Century Britain: From Mary Shelley to George Eliot* (Cambridge: Cambridge University Press, 2004), p. 77.

¹⁶ Thomas John Graham, *Modern Domestic Medicine or a Popular Treatise Illustrating the Character, Causes, Distinctions and Correct Treatment of all Diseases Incident to the Human Frame* &c, (London: Simpkin & Marshall, 1826), p. 392. Selected pages of Patrick Brontë’s annotated copy are available on the British Library’s website.

detail. Charlotte Brontë's letters to Ellen Nussey record her sympathetic interest in Ellen's brother, George's gradual deterioration in mental health with 'monomania', which led to his becoming a permanent inmate of Dr Henry Stephen Belcombe's privately run Clifton Asylum in York from August 1845 to 1853. Brontë had known and admired George as Ellen's brother in the 1830s. His condition was first mentioned in a letter dated 13 October 1843 as a 'severe illness' from which he was 'scarcely expected to recover'.¹⁷ By March 1845 this had become a 'brain fever' as Charlotte Brontë omitted any use of the words 'mania' or 'monomania'. Instead she tried to comfort her friend;

'Do not dear Ellen be disheartened because George's improvement in health is slow – When one thinks of the nature of his illness – of the extreme delicacy of the organ selected (the brain) it is obvious that that organ after the irritation of fever & inflammation could not all at once regain its healthy state – it must have time – but with time I do believe a complete cure will yet be effected'.¹⁸

The letter is interesting as it reveals her belief in the episodic nature of madness and also its organic aetiology. Repeatedly in both Charlotte and Emily's fictions, (and in Gaskell's), 'brain fever', with its temporary insanity, attacks their vulnerable heroines in order to offer narrative respite after a climatic ordeal. Its comparatively indisputable status confines one to bed and its 'fever' implies tangible, physical symptoms in the form of 'inflammation' and a general rise in temperature. Likewise, the possibility of contagion which the word 'fever' implies also makes it a more pressing social concern. Monomania, by contrast, was not attended by fever according to Esquirol's symptomatology.

1.2 Withheld beginnings signal a lack of 'social capital'

The opening chapter of *Villette* gives the reader a strange cue. Lucy Snowe initially represents her journey as a spiritual pilgrimage: her time with the Brettons resembles 'the sojourn of Christian and Hopeful beside a certain pleasant stream, with "green trees on each bank, and meadows beautified with lilies all the year round"' (6). This suggests that her stay with them is only a temporary rest on what will ultimately be a demanding journey to her final destination: the 'Celestial City' of John Bunyan's story, but in Lucy's case, a place of reciprocity and fulfilment with another who can share her life. Therefore, finding 'quiet' sanctuary with her kindly godmother, the story appears to be a foundling narrative, but then abruptly switches to Lucy's curiously detailed descriptions of the household's new arrival, Paulina Home. Paulina's

¹⁷ *The Letters of Charlotte Brontë with a Selection of Letters by Family and Friends*, ed. by Margaret Smith, 3 vols (Oxford: Oxford Clarendon Press, 2000), I, p. 334.

¹⁸ *The Letters of Charlotte Brontë*, I, p. 385.

uncanny, doll-like presence unsettles and expectations are confused as the narrator's tone shifts to hostility. Whilst Paulina's surname suggests the comfortable domesticity which her submissive femininity will guarantee to her future husband, Dr. John Graham, this turns out not to have been the case for her indulgent father whose marriage to her beautiful but empty-headed mother failed shortly before the latter's recent death. Despite her father's subsequent (and seemingly neglectful) prescribed travels to recover his nerves, his daughter waits anxiously for him with an obsessive devotion.

Whether *unheimlich*, an uncanny gothic 'haunting' to Lucy's realist self, or an unrepressed, 'feeling' alter-ego of the painfully repressed and inhibited Lucy who ignores the promptings of her own desire, or an example of the exaggerated femininity which Lucy despises, Polly is the first of several illustrative antagonists and also the subject of intense scrutiny by the narrator.¹⁹ Her narrative explores the bodily excesses of Polly's emotions; her dilated eye, 'both troubled and glowing', her crimson cheek and trembling lips, and these become the 'symptoms' of an illness whose cure is the calm regulation of feeling in order that she will be able to 'get through this world' (34). Her bedtime prayers might be construed as the quietly muttered longings of a six year old desperate to see her one remaining parent but the fourteen year old Lucy finds them odd, so odd in fact that she asserts: 'This, I perceived, was a one-idead nature; betraying the monomaniac tendency I have ever thought the most unfortunate with which man or woman can be cursed' (12). Polly's 'monomania' here appears connected to three things: her idolatrous prayers (offensive to Lucy's Protestantism), her weak dependence on a male authority-figure (unlike Lucy's self-sufficiency) and her pitiful lack of stoical reserve (the key cause of Lucy's disdain). That Lucy might fail prey to all these weaknesses herself is the crucial subtext.

Lucy's cold disdainful observations continue on the following day as Polly's father, Mr. Home, arrives unannounced to see his daughter. Lucy graphically details the changes this brings to Polly's face: 'I witnessed in its irid and pupil a startling transformation' and her 'fixed and heavy gaze swum, trembled, then glittered in fire; the small overcast brow cleared; the trivial dejected features lit up; the sad countenance vanished, and in its place appeared a sudden eagerness, an intense expectancy' (13). Such bodily display is deeply problematic for Lucy; its spontaneity causing 'a scene of feeling too brimful,' and entry onto a spectrum of psychopathology. It is too much demonstrable emotion, particularly such doting, feminine servility, which in her borrowed words, label one a 'monomaniac'. Polly's exuberance

¹⁹ Sandra M. Gilbert and Susan Gubar make this point in 'The Buried Life of Lucy Snowe' in *The Madwoman in the Attic* (1979) arguing that 'Polly's parasitic attachments define the younger girl' and that she is the first in a series of 'representative antagonists' (p.404). Gilbert and Gubar also cite Q.D. Leavis's point, made in the Harper Colophon 1972 edition of *Villette*, that 'little Polly is an externalisation of [Lucy's] inner self' p. xxvi.

therefore speaks tellingly of Lucy's clipped emotionality, but most particularly an emotionality which is cloyingly feminine and subservient. Polly is eager to serve her father, she busies herself with the ceremony of afternoon tea and caters for his every whim in a weird enactment of wifely fussing. From Lucy's point of view, this exaggerated femininity is both startling and repugnant. In an unusual assertion of her own identity she insists 'I, Lucy Snowe, plead guiltless of that curse, an over-heated and discursive imagination' but that nonetheless the room feels 'haunted' by Paulina who is like a 'Catholic' in her unhealthy devotion to the figure of her father (12).

Polly's intuitive reaction and behaviour towards Lucy is distrustful: she is eager to avoid her company or the intimacy of being dressed by her. The narrative gap here is a clearer understanding of Polly's wariness; we do not have omniscient access to her thoughts. There is a hint that Lucy is stand-offish and we know that she is unsympathetic to the messiness of Paulina's ostensibly childish emotions. But when Polly's father leaves the girl wastes no time in immediately switching her attention to a new figure of male authority. Lucy's detached observation records Polly's besotted behaviour in John Graham Bretton's company as the two children engage in a parody of flirtatious conversation; an uneasy scene clearly signalling their later marriage. Asking Lucy to communicate the news that she is leaving Bretton in order that she might scrutinise young John Graham's reaction, Polly is distraught when his indifferent lack of concern is revealed. Lacking the restraint of a 'measured' response she lies prostrate on the floor at his feet. Lucy meanwhile unreliably admits that she only likes John Graham 'a little'. Both reactions are counter posed as ludicrous. Polly rehearses the behaviour of a spurned lover and Lucy's wariness betrays 'the warmer feelings' she claims she does not have.

When pressed by her publisher to include more detail of her character's history in order to avoid Lucy appearing 'morbid', Brontë declined, writing 'she is both morbid and weak at times ... and anybody living her life would necessarily become morbid'.²⁰ We have oblique clues about her origins but the withheld narrative, particularly details concerning her parents and her early childhood, is regarded by some critics as the key to her unreliability. There is an important strand of recent literary criticism which argues that her narrative is one of 'arrested memory'.²¹ This may be seen as part of a wider trend within some psychoanalytical criticism to overlay the recent category of post-traumatic stress disorder onto Victorian literature. With regard to *Villette*, this view maintains that the narrative gap in place of her early childhood leaves contains a traumatising rationale for Lucy's ill health and her

²⁰ *The Letters of Charlotte Brontë*, III, p. 80.

²¹ See Alexandra Lewis, 'Stagnation of Air and Mind: Picturing Trauma and Miasma in Charlotte Brontë's *Villette*', in *Picturing Women's Health*, ed. by Francesca Scott, Kate Scarth and Ji Won Chung (London: Pickering and Chatto, 2014), pp. 59-76.

recurrent strategies of avoidance. Taking this view, she is unreliable because struggling with unprocessed events which impede her. Lucy urges the reader to imagine her 'idle, basking, plump, and happy' during an idyllic childhood, but she makes clear that this was not the actual case (35). We do know that she is plagued by nightmares and that she has endured an experience akin to being 'shipwrecked at sea' during the eight years between her stay at Bretton and her employment as a nurse-companion to Miss Marchmont, but these details are metaphorical and are never committed to literal exposition. The nautical metaphor in which 'the ship was lost, the crew perished' signals a psychological journey of loss and bereavement with its accompanying anguish, but specific incidents of traumatising shock are not clearly elaborated (35). An undeniable narrative silence might be filled with trauma articulating the text's discomfiting sense of peculiarity but this remains tenuous. This 'incompleteness' of the novel is replicated at its end, when there is no neat exchange of vows and M. Paul Emmanuel is lost at sea as the consequence of a great storm. It is unclear whether he is dead or a survivor but significantly the courtship plot is left unresolved.

Whilst twenty-first century neurological thinking on the childhood development of the amygdala (the part of the brain where involuntary 'emotional' responses are thought to originate), suggests that anxiety is definitively linked to early trauma, the mid-Victorians were of course still grappling with the very idea that the brain had localised functions rather than looser 'faculties' or discrete areas. Lucy's desires and experiences appear to be debated fiercely by a conscious mind attempting to articulate her 'illness' rather than one speaking to us through a haze of historic trauma. So Brontë's unwillingness to elaborate on her narrator's immediate familial past, and the refusal to offer a smoother bildungsroman in the spirit of *David Copperfield*, with perhaps a warmer, more agreeable narrative voice, provokes a divide in emphasis between psychoanalytic critics who follow the argument that Lucy is the victim of unprocessed trauma, and those critics whose focus is upon the primacy of the text as a given, and the need to work with the idea that her unreliability signals patriarchal oppression and social control at a more present and immediate level.

This chapter intervenes in this debate by arguing that in her depiction of Lucy's emotionality, in which feeling quickly crosses a line into illness, where demonstrations of love can become monomaniacal and sexual desire is shamefully repressed, Brontë rehearses the circulating management (or repression) of a broad emotional range. This includes affectivity such as facial expression and other bodily gestures with which the narrator is intensely concerned. Introduced as a 'blank', Lucy's 'feelings' are shaped deliberately to outwardly fit a culturally contingent set of permitted emotional responses. Spontaneity is ill-advised and management is all. *Villette* is a text which does not confine itself solely to the pursuit of

amatory love, but is one about human isolation from human companionship in its totality. Lucy Snowe is presented as a character with no ‘social capital’, which, although a modern and multifarious psychiatric construct, broadly indicates that she has no existing relationships offering reciprocity and trust.²² Because isolation and mute watchfulness are her defining characteristics, a prognosis of poor mental health, or as the Victorians would have it, ‘low spirits’ is highly probable. Presciently, Brontë was particularly horrified by the idea of solitary confinement and its effect upon the mind (such as is typified by Lucy’s ‘Long Vacation’ which I later discuss) and visited prisons and the Bethlem to witness this method and its common effects: nightmares, hallucinations, suicide attempts (and on release) listless torpor and hysterical crying.²³ Indeed, in some ways this chimes with the current modern paradigmatic shift in approaches to mental health from curative to preventative in which reducing isolation, enjoying the trustworthiness of others and thus enabling ‘social capital’, is increasingly seen an important area of mental health research.²⁴ Importantly then, Lucy arrives as a ‘blank’, her own self-description, which is deliberately echoed by the novel’s form: she has no family or connections to hold her in conventional modes of behaviour, only a reliance on her broad Church Protestantism. It is possible to argue for a trauma about which the text is largely mute, but the main point is that she appears, initially at least, as profoundly isolated. Without the mandate ‘to feel’ which might be allowed by a sympathetic other, her descent into a numb, self-annihilation and vacuity is seemingly assured.

1.3 Miss Marchmont

In the concluding section to these opening chapters on Paulina the narrator’s assessments of character develop. Paulina is bereft at the thought of leaving John Graham and Lucy soothes and ‘tranquillizes’ this ‘small ghost’ by warming the young child in her bed (34). Lucy’s sensitivity appears less blunted, the distance in demeanour between her and Paulina reduces, and the next day the once exuberant Polly now exercises ‘self-command’. This opening incident stands in marked contrast with the following chapter, ‘Miss Marchmont’. Here the reader is offered Lucy’s developing sense that emotional self-expression is to be cherished and valued as she embarks upon the only employment open to her, as a nurse-companion to the severely rheumatoid, Miss Maria Marchmont. The outward appearance of self-abnegation that Lucy had prescribed to Polly is tested rigorously by the widow; her

²² See Kwame McKenzie, Rob Whitley and Scott Weich, ‘Social Capital and Mental Health’, *British Journal of Psychiatry* 181, 1992, 280-283 which cites the American political scientist Robert Putman who defined the concept: ‘Social capital describes the features of social life – networks, norms, and trust – that enable participants to act together more effectively to pursue shared objectives’ p. 280.

²³ Elaine Showalter, *The Female Malady: Women, Madness and English Culture, 1830-1980* (London: Virago, 1985), p. 69.

²⁴ See McKenzie, Whitley and Weich.

mistress becomes her 'all' such that she 'forgot that there were fields, woods, rivers, seas, an ever-changing sky outside the steam-dimmed lattice of this chamber'. Like Tennyson's 'Mariana' within her 'four grey walls' (1830) the chapter's sense is one of stasis, with the figure of a woman waiting in vain for a lover conflated with her putrefying surroundings. Miss Marchmont's revelation that, some thirty years ago, before having the chance to marry him, she was in love with a man whose death came about abruptly following a tragic riding accident, confirms her as a type of lesser-gothic Miss Havisham. The emotional catatonia is realised metaphorically here through crippling rheumatism but is also confirmed by her death-bed confession that her former lover has been the 'object', the 'single self' of her thoughts, to the exclusion of God, for all of her remaining life. Fearing that 'salvation' will not come given the blasphemy of having such fixed thoughts, Miss Marchmont's inclusion in the text is a salutary foreshadowing: a lifetime's undeclared 'feeling' and consequent seclusion is perhaps more toxic than an overly-demonstrative Polly. Whilst Miss Marchmont is not pathologized by the text, her abject state is clearly pinned to her over-zealous internalisation of religious self-abnegation. As before at Bretton, Lucy's presence in the widow's house sees her undergo a loss of her own identity; she becomes an extension of her employer, subject to her in every way, observing the dangers of her own prescription of rigid self-control to Paulina play out in a scene of physical decay.

1.4 Facial 'hieroglyphics'

The novel's intricate presentation of emotion, in both psychological and religious discourses, operates within a framework grappling with the increasing secularisation of emotion and a struggle for pre-eminence between brain and soul. Arguably this begins with the facial hermeneutics of physiognomy and pathognomy. The curiously 'plain' face of Lucy Snowe and the faces of other characters in the novel are particularly significant. Posing as science, but existing in a space somewhere between flagrant quackery and esteemed clinical insight, physiognomy claimed that the face and the head could be 'read'. Later popularised by commissioned sketches of the mad and eventually by photography, John Casper Lavater's *Essays on Physiognomy* (1789), as Bourne Taylor and Shuttleworth have highlighted in their anthology, *Embodied Selves*, had a religious base.²⁵ Lavater accepts, for example, that 'How spiritual, how incorporeal soever, his internal essence may be; yet never can his properties be wholly known, still he is only visible and conceivable from the harmony of his constituent parts', in other words, physiognomy is inexact, an approximation of character but unable to

²⁵ *Embodied Selves: An Anthology of Psychological Texts 1830-1890*, ed. by Jenny Bourne Taylor and Sally Shuttleworth, (Oxford: Oxford University Press, 1998), p. 8.

get at spiritual essence.²⁶ The closest one might come to this is by the precise observation of physiognomical features which depict the intellect: the forehead and the eyes. Charles Bell's 'pathognomy' placed the emphasis more firmly on the varying expressions of the human face as these reflect different emotions. He pursued a closer understanding of the active passions and of the facial muscles these engaged. Alexander Morison's *The Physiognomy of Mental Diseases* (1843) is typical of early psychiatric medical treatises in its picking and choosing of various aspects of these approaches. On the 'moveable physiognomy' of madness (by which he probably means its pathognomy) he wrote:

The appearance of the face, it is well known, is intimately connected with, and dependent upon, the state of mind. The repetition of the same ideas and emotions, and the consequent repetition of the same movements of the muscles of the eyes, and of the face, give a peculiar expression, which, in the insane state, is a combination of wildness, abstraction, or vacancy, and of those predominating ideas and emotions which characterise the different species of mental disorder, as pride, anger, suspicion, love, grief, etc.²⁷

Alongside these scientific tools, the novel's residual discourse of the soul and soul-sickness, which struggles with the new brain science for supremacy over the psyche, refuses to be silenced. Whereas illness might previously have been framed as punishment and avenging justice for sin, this idea was undergoing profound modification with a new emphasis on human agency and self-reliance. The precepts by which Priscilla Maurice's *Sickness* seeks to relieve 'intense suffering' include methods for enduring nervous symptoms so as not to burden others: 'People only see what is outward... they see the countenance. They do not see the unutterable, awful struggle which is ever going on, and which, by the grace of God, prevents much evil from coming out.'²⁸ And so a dispassionate countenance sealing an inner life might avoid alienating others. Maurice is quite precise on this point:

Try to cultivate self-control in all your words, looks, and actions. Do not show the pain you are suffering, more than you can help in your expression, as it is surprising how much habit and discipline may do on this point. Be very careful also how you describe your pain. Never exaggerate it in any way for this is sure to increase its reality for you. Also, exaggeration is sin.²⁹

The use of physiognomical or phrenological language in *Villette* is considered by some critics to be 'unembarrassed'.³⁰ Confusingly, these terms are invariably conflated by

²⁶ J. C. Lavater, *Physiognomy; or, the Corresponding Analogy Between the Conformation of the Features and the Ruling Passions of the Mind*, 30th ed. (London: Thomas Tegg, 1844) p. 25

²⁷ Alexander Morison, *The Physiognomy of Mental Diseases*, (London: Longman, 1843), p. i.

²⁸ *Sickness*, p. 90.

²⁹ *Sickness*, p. 90.

³⁰ Nicholas Dames, *Amnesiac Selves: Nostalgia, Forgetting, and British Fiction, 1810-1870* (Oxford: Oxford University Press, 2001), p. 81.

commentators, perhaps reflecting Brontë's own blurring of the two pseudo-sciences. However whether the text is purely 'unembarrassed' may overstate the case: there are certainly hints at the charlatanism of the each 'diagnostic' process. Famously, on arriving in Villette at Madame Beck's *Pensionnat de Damoiselles* the proprietor asks Monsieur Paul Emmanuel to read Lucy's countenance using his skill in physiognomy; a peculiar request to be read as wilfully demeaning on the part of Madame Beck. M. Paul's skill affords no definite conclusions (at least that he is prepared to reveal at that moment in the narrative's plot), he merely observes rather vaguely and mysteriously that he reads '*bien des choses*', but nonetheless he is allowed to determine Lucy's fate by suggesting she be allowed to stay on as an employee. In an inversion of the doctor/patient relationship, Lucy meanwhile 'reads' M. Paul while he 'reads' her. She notes 'the resolute compression of his lips, and gathering of the brow' as he tries to 'unveil' her. The point in this scene is not one about insight into 'the other', but more particularly about power and judgement. Lucy cannot be controlled by Madame Beck and M. Paul as she is already constrained so tightly by her own self. Beth Torgerson makes a similar point here when she argues that: 'At first, the Catholics in positions of power observe and scrutinize Lucy, such as when Mme. Beck and M. Paul concern themselves with watching her, looking for impropriety. Both are astonished to realize the lack of necessity for this surveillance'.³¹

This emphasis on exteriority may be couched as an ostensibly scientific scrutiny; but it reads more generally as a policing of affect and expression *per se*. It means that throughout the novel disclosure on the face might become a terrible weakness: as Lucy tightly regulates her own expression she is mercilessly inspecting the expressions of others. This is also the case with Paulina Home at the novel's opening whose expression is mapped in all its physiological minutiae. Mademoiselle St. Pierre, having been first compared to a snake, comes in for particular physiognomic scorn being 'thin in face and figure, sallow in complexion, ... lips like a thread, a large, prominent chin, a well-opened, but frozen eye, of light at once craving and ingrate' leading to the unsparing assessment of her being 'an insipid, heartless, brainless dissipation of time' (126). A construction of intellectual acuity, the narrator is astutely cognizant of what is emotionally permissible according to the culture of 'surveillance' and how this might be encoded in expression, comportment and manner. Although Lucy suggests that Mademoiselle St. Pierre's physiognomy aligns with her immoral, pleasure-seeking, 'profligate' self, and despite the fact that she imparts no knowledge and is an incompetent teacher, her willingness to ingratiate herself with Madame Modeste Beck and act as one of her spies

³¹ Beth Torgerson, *Reading the Brontë Body: Disease, Desire, and the Constraints of Culture* (London: Palgrave, 2005) p. 64. Torgerson's chapter on *Villette* reads physical and mental illness as a critique of Catholic culture. My own position differs from this in that I read the novel as laying bare Lucy's reliance on Protestantism (and the management of emotion) which acts as a 'treatment' for her self-diagnosed condition.

apparently ensures her position. Lucy's 'physiognomic' reading acts to confirm her own hostility.

Nicolas Dames argues that Charlotte Brontë's textual effacement of memory in *Villette* mimics the Victorians' reliance on phrenology and physiognomy to form judgements about people. Their memories and recollections were, until the 1870s, 'among the least compelling of mental processes' and 'understanding' a person relied upon decoding their exterior (9). Rather than identifying trauma as underpinning the form of the novel, Dames argues that Lucy's conspicuous suppression of her past is an aspect of the way in which physiognomy and phrenology shape the form. The characters act on what they see on others' faces, and what that allegedly predicts about their future, not what they learn about their history. In this way character becomes fixed and any prior contingent events do not shape that character. The narrative gaps in the text that are manifold are meant to signal a collective 'amnesia' in which memory is relegated to insignificance. We know that Lucy's origins are vaguely shaped in the opening chapter. As mentioned, the events are left largely untouched, feasibly but not definitively signifying orphanage, the point being that this opacity is persuasively read by Dames as intrinsically reflecting a contemporaneous pseudo-scientific outlook where the surface is accorded pre-eminence and interiority is negligible.

Lucy continues to practice pseudo-scientific methods as she endures life at the *Pensionnat*, also co-opting Phrenology, and the related 'craniology', which 'read' bumps in the skull. Significant because it began an understanding of cerebral localization, it also appealed to the middle class, as Shuttleworth argues, because it depended upon the idea of exercising and cultivating certain areas of the brain in a project of self-help and improvement.³² Although an arguable advance in understanding, 'faculties' were given (rather arbitrary) names such as 'amativeness', 'adhesiveness', and 'philoprogenitiveness'. The phrenologist's written report to his client would typically be couched in the middle-class language of aspiration: so-and-so has a propensity to excel in matters of business and so forth. In this way character was not so much fixed, but malleable, with the potential for on-going improvement. The adult Lucy jealously finds other people poised and self-reliant, none more so than the widowed Madame Beck who has carved out a financially successful business and operates as another foil to the protagonist. Observation is a tool for them both. Madame Beck watches Lucy asleep, sitting on the edge of her bed for a full quarter of an hour, studying her face and then taking wax impressions of the keys to her trunk, desk and work-box: Brontë leaves the reader in no

³² In *Charlotte Brontë and Victorian Psychology*, Shuttleworth argues that phrenology was not 'invariant' but rather was a forum in which competing ideologies of gender and nation were played out. By implication, Lucy's own versions of physiognomy and phrenology suggest their subjective, prejudicial nature.

doubt; ‘surveillance’, ‘espionage’ – these were her watch-words’ (72). She wins Lucy’s admiration for her detachment and ruthless style of management, but her lack of tenderness or tactile affection, even towards her own children, makes her appear calcified. Indeed, Madame Beck is a woman, Lucy concludes, without ‘feelings’ with a ‘face of stone’ and her own phrenological reading confirms this; her high but narrow forehead suggesting ‘no expanse’. In the spirit of a bildungsroman Lucy has developed; her earlier high-blown, clinical dismissal of Polly’s feelings in the opening chapters is now found wanting and we see signs of a new antipathy towards the disproportionate emotional restraint of her mistress. Meanwhile Madame Beck regards Lucy’s Protestant religion with suspicion. Her pupils are briefed to report back on anything she says that touches on religion and, having been indoctrinated, casually inform their teacher that she is misguided, ‘*Parceque, quand vous serez morte – vous brûlerez tout de suite dans l’Enfer*’ (84).³³

Lucy’s obsessive self-analysis, is sometimes transferred to others. A brief sighting of the King of Labassecour’s facial ‘hieroglyphics’ at a concert confirms him as beset by the ‘strangest spectre, Hypochondria’ (213); John is melancholic (187,313); Polly, as we know, is ‘monomaniacal’ and Ginevra Fanshawe is ‘hysterical’ (105,178). As is clear, Lucy has internalised the popular prefixed categories of modern medicine and its contemporary thinking on diseases of the mind. She uses the vocabulary of alienism: ‘physiognomy’, ‘catalepsy’, ‘monomania’, ‘nerves’, ‘hypochondria’, ‘faculty’, and couches these ideas in the narrative alongside religious ideas of ‘passion’, ‘sin’ and ‘sorrow’ which she more readily applies to herself. Lucy does not pin down the material complexity of her abject situation, or use a sympathetic language to express the heightened emotions she feels, because these very emotions are deemed either morally inexpressible or symptomatic of ill-health. The words she uses are discursive: we hear other voices which define her experience for her. So while I read Lucy’s narrative as a self-styled tale of spiritual endurance and a warning against idolatry (in this case her love of Dr. John becomes ‘sinfully’ excessive), it can also be conceived as a self-diagnosing nervous collapse. Shuttleworth reads the text as a rebellion against a new watchful, materialist psychology in which Lucy evades and attempts to make herself ‘illegible’ to the male gaze. She understands the taxonomy of mental illness and is wary of its reductive power. Shuttleworth adds that in her refusal to surrender herself to this potentially humiliating and objectifying appraisal of others she frustrates Dr. John Graham’s discourse by satirising it.

1.5 The Long Vacation

³³ ‘Because when you die, you will immediately burn in hell’.

With all the other staff despatched to various corners of France and the continent for the eight week holiday, Lucy is left alone with the servant girl Goton and Marie Broc the *crétin*, another alter-ego whose ugly exterior and dependence are projected. Her narration is despairing: 'a want of companionship maintained in my soul the cravings of a most deadly famine' (158). Following the removal of Marie Broc, Lucy is free to jealously dwell on the developing connection between Ginevra and John Graham and in a moment of self-conscious reflection she reveals that her 'nerves are getting over-stretched' and that a 'malady' is growing upon her mind and desperate for relief from her situation, she asks, 'How shall I keep well?' (159). It is following this period of isolation with the *cretin* for three weeks and in a state of great distress, that she willingly reaches out to Catholicism as a potential support.

The so-called 'Papal Aggression' or re-establishment of the Roman Catholic hierarchy of cardinals and bishops in England in 1850 contextualises this. Daniel Wong has argued that though the novel is often read as an 'anti-Catholic diatribe' he maintains that 'the fact that Lucy chooses to confess seems to be motivated, at least in part, by her recognition that were she Catholic, she might find forgiveness there - a move we might read as an implicit critique of a stripped form of Protestantism that overemphasizes self-reliance'.³⁴ It is true that in contrast to the Protestant insistence on mute suffering, self-constraint and self-reliance, the Catholic priest allows Lucy to express her profound pain, even though she is resolutely not of his faith. Both the expression of emotion and the intimacy involved in this confession are temporarily, but irresistibly attractive to her. Similarly, the sense that Père Silas might help mitigate the effects of the novel's impending scientific diagnosis from the emblematic Dr. John, rehearses the novel's wider trope where 'Reason' is conflated with science and 'Feeling' is allied to dissipating metaphysical beliefs. Nevertheless, since Père Silas may also tempt Lucy towards conversion to Catholicism, this outlet is curtailed, his comment that 'Protestantism is altogether too dry, cold, prosaic for you' seems to re-awaken her briefly dormant sense of perseverance (162). Although thankful for his 'sentimental French kindness', Lucy refuses to reject her code of English Protestantism seeing submission to the Roman Church as (to use its own fiery imagery) 'walking into a Babylonish furnace' (163).

Transported to *La Terrasse*, the Bretton household, after her collapse following confession, Lucy's equilibrium of Protestant self-reliance is restored. She reflects on her struggles and the dangers of Feeling, concluding that Reason is a better guide through life. Reason in conduct and thought, she concludes: 'enable it to be better regulated, more equable, quieter on the surface; and it is on the surface only the common gaze will fall. As to what lies

³⁴ Daniel Wong, 'Charlotte Brontë's *Villette* and the Possibilities of a Post-secular Cosmopolitan Critique' in *Journal of Victorian Culture*, 18:1 (2013) 1-16, 13.

below, leave that with God. Man, your equal, weak as you, and not fit to be your judge, may be shut out thence' (179). Thus calmed Lucy receives Dr. John Graham who is keen for an explanation of the circumstances of her discovery outside the old Catholic church. He confirms that her collapse was due to nerves and prescribes 'cheerful society'. Candidly he admits: 'My art halts at the threshold of Hypochondria: she looks in and sees a chamber of torture, but can neither say or do much' (183). Lucy recognises this diagnosis as 'well-worn' and one of 'custom,' and is effectively permitted to feel out of sorts. More tellingly, Dr. John is eager to know her religion, asking if she is now a Catholic. Whilst Protestant self-reliance can co-exist with medical science in emotional self-regulation, alignment to an old system of Catholic passion might have proved more problematic.

1.6 The 'grovelling, groping monomaniac' appears in the attic

Significantly, the cloistered, labyrinthine *Pensionnat des Damoselles*, where the education of young women is not taken especially seriously, used to be a convent. The association between convent and asylum, which both incarcerate women and popularly have a limited regard for their mental health, is certainly implicit. It therefore offers an appropriate setting for Brontë's conflation of mock-Gothic and clinical parody. Alongside this it functions at a national level. Safely quarantined by supposed geographical distance, the *Pensionnat's* parody of Catholicism provides an open demonstration that the psychological aberrance the reader is a party to could not flourish within the bounds of Protestant England. Lucy is seduced by an exotic, foreign emotional code, before seeing sense.

In the early months after her arrival Lucy takes to wandering alone in the evening in the gardens at the back of the house. She recalls the fact that according to legend, somewhere in the gardens there was the portal of a vault which contained the bones of a girl buried alive for some 'sin against her vow' (106). This foreshadows the ghostly nun, and Lucy duly dismisses it as 'romantic rubbish' to set up the appearance (106). Musing on how she could 'feel' when she thought of her childhood, when it comes to the present Lucy reveals how: 'in catalepsy and dead trance, I studiously held the quick of my nature' (109). The pairing of Lucy and the 'buried' girl is clear. She is a further alter-ego: a bodiless, religious spinster. As it turns out this vision is, in fact, not ghostly, but the real Count de Hamal disguised for his clandestine trysts with a schoolgirl, the garments of which Lucy eventually finds bundled in her bed in the shape of this fake nun. By implication, her sanity is confirmed with the restoration of rational explanation. However, her sense that human intimacy or interaction always converts into a detached scrutiny in which one attempts to divine in another person the signs of 'emotion,' paradoxically leaves no room for the spontaneous, 'romantic' feeling of

those emotions, leaving her in a 'catalepsy', like a live burial. The nun becomes a complicated symbol; both a suggestively transgressive, sexually liberated (but not quite vampiric), clichéd nun of mock-gothic adventure appearing at the text's most heightened moment of passion, and simultaneously, a 'buried' nun whose emotions are not countenanced and are sinful. Crucially the appearance of the nun signals Lucy's yearning for Dr. John Graham.

The nun's first appearance occurs when Lucy's over-riding concern is to read and possess John's unread letter. Whilst searching frantically for it in the garret, as the other members of the party inspect the scene of the 'haunting', Lucy's narrative switches as she refers to herself in the third person. Wringing her hands, barely registering the presence of other people she says: "Oh! they have taken my letter!" cried the grovelling, groping monomaniac' (246). Clearly her passionate behaviour here will be deemed 'excessive' by an unsympathetic psychiatric scrutineer and it just such an unsympathetic voice Lucy assumes. She is a Bertha Mason, a wild animal, 'grovelling' and scrabbling, acting beyond any codes of civilised behaviour.³⁵ The mock-Gothic attic and the verb 'grovel' suggests Brontë's rewriting of the notorious scene in *Jane Eyre* (1847). The critical commonplace which associates Jane Eyre's wilder half, Bertha, with sexual desire is equally pertinent here: Lucy herself associates female sexuality with mania. However, unlike the hereditary taint which Bertha is given, Lucy is a 'monomaniac'. This echoes Polly's love for her father and Dr. John Graham earlier in the novel and suggests Lucy's simultaneous desire for, and fear of, intimacy.

Of course the reader understands clearly that she is also desperate to cling onto an evidence of human kindness, apparently denied her so consistently throughout the text. This knowledge, alongside the inter-linking of the mock-Gothic and the clinical undercuts her own, and Dr. John's later 'diagnosis'. Hers is a simple desire for an intellectual and trusting reciprocity, here realised in the exchange of letters, an exchange that one might add in biographical aside was crucial to Brontë herself. Also, that this letter should have come from the ostensibly well-intentioned Dr. John is full of irony as he is also the 'thief' who held on to the letter and the subsequent expert on her distress. He has offered her a friendship, the limitations of which she is perhaps unable to comprehend given her painful lack of social capital. In turn, her modest but repressed assumptions of a reciprocated affection here find vent, leading to her self-diagnosed 'monomania'. Whilst this might also be a physician's

³⁵ See Charlotte Brontë, *Jane Eyre* (Oxford: Oxford University Press, 2008) p. 293. Here, Brontë uses the word 'grovelled' to describe Bertha when Jane sees her for the first time: 'What it was, whether beast or human being, one could not, at first sight tell: it grovelled, seemingly, on all fours; it snatched and growled like some strange wild animal: but it was covered with clothing; and a quantity of dark, grizzled hair, wild as a mane, hid its head and face'.

diagnosis of her case history, Lucy implicitly denies its veracity by co-opting and parodying the language such a physician would use.

Following this sighting of the spectral nun, it is Dr. John who coaxes Lucy with the words; 'You may trust me as implicitly as Père Silas. Indeed, the doctor is perhaps the safer confessor of the two' (249). His diagnosis is however the more dubious of the two, certainly in terms of the text's framing of it. An urbane materialist, Dr. John attracts Lucy and all her antagonists in the novel; Polly, Madame Beck and Ginevra, by offering a new upper middle-class professional swagger and the allure of cultural savvy. When he scrutinises Lucy following her distress, he insists 'I look on you now from a professional point of view, and I read, perhaps, all you would conceal'. Thereafter, Dr. John observes a number of physiological signs, noting her 'curiously vivid and restless' eyes, her pale cheeks, and unsteady hands: these somatics of emotion have now become part of a symptomatology. Indeed the Doctor's penetrating gaze does not seem to go beyond these 'concealing' features. Rather like the physiognomy informing it, early mind-doctoring is clearly rather arbitrary in its readings. So, he is kind and sympathetic, but also rather inept. He urges her to 'cultivate happiness', placing the responsibility for 'illness' squarely with her (250). Lucy objects to the idea that she is this metaphorical farmer, and given the limited application of this 'scientific' curative advice when confronted with her own social and material reality, she can only observe drily that 'happiness is not a potato' and later, when he takes to the theatre to begin such a process of cultivation, she finds him 'self-opinionated', an opinion she dare not voice. His cure, like his diagnosis, may attempt to constrain to his patient's sense of self but resoundingly fails.

However, whilst Lucy satirises the new psychiatry that would pathologize her with its modish categories, her internalisation of a more sustained Protestant code of self-control is ultimately more pernicious. Like Priscilla Maurice she is wary of a refined, godless discourse of 'nerves' but stays firmly within the boundaries of Protestantism, leaving her passions inarticulate. The scene is pitiful because, briefly and privately, Lucy has self-consciously allowed herself to love, and when her involuntary and revealing behaviour threatens to make this public knowledge, a reductive diagnosis looms. The scene is also significant, if anti-climactic, because fleetingly the reader is presented with the possibility of a courtship plot through an emblematic letter of love. However, as it turns out, the letter is framed as a simple, good-natured, friendly attempt to alleviate loneliness.

In the weeks after the nun episode Lucy writes brief, reasonable letters to Dr. John and, prompted by 'Feeling', she writes unsent letters to him, an outlet for her own 'relief'. The reader is not given access to these 'letters'; another textual silence which leaves an ambivalence

clouding any courtship plot and, more crucially, avoids indulgence in a romantic, 'excessive' language of feeling. Both omissions are telling. Nonetheless, during this period of recovery Dr. John takes Lucy to the theatre to see a performance of the unruly wife, Vashti. The actress offers Lucy a glimpse into the powerful possibilities of heightened feeling as she appears on the stage with 'HELL on her straight, haughty brow'. A dramatic, staged antithesis to Lucy of 'Hate and Murder and Madness incarnate' (257), her performance thrills the narrator with its 'mighty revelation' of visible passion. Lucy details her 'eye of a rebel'; her body moves with 'the uttermost frenzy of energy' and 'she rends her woes, shivers them in convulsed abhorrence' (258). Whilst she is moved and inspired at such a display, Dr. John looks on with a cool detachment, unmoved, watching a 'fury [that] revolted him somewhat' (260), the depiction of passionate feeling by a woman being unbecoming.

1.7 Conclusion

As the text disparages 'psychiatric' accounts of her plight, Lucy's lapses into religious rhetoric and her search for religious consolation demonstrate the simultaneous and enduring hold of Christian notions of a 'soul' and the 'passions' over modern ideas of the psyche. Her understanding of her plight is steeped in a Protestant discourse with an emphasis on human agency. The text therefore rehearses a complicated battle between 'priest' (used in its widest Christian sense) and doctor for supremacy over her heightened emotions, the former offering a last gasp of religiosity before the more decisive advent of hardwired emotions and evolutionary psychology. The use of 'monomania' in the work of the Brontë sisters began its canonical trajectory in English literary discourse and offered a critical glimpse of modernity. Posing questions about proportionate emotional response, their framing of the idea pushed forward a more penetrating version of novelistic subjectivity. In *Villette* love renders Lucy Snowe 'monomaniacal' by her own definition. Knowingly unable to articulate her romantic feelings she is instead preoccupied with concealment, and especially facial hermeneutics. This mirrors both scientific and popular religious advice: insanity is written on the face and betrayed in excessive emotion. Her unreliable narration is intensely concerned with how facial expression and other bodily gestures might become the 'traitorous' symptoms of true feelings. Whilst the text satirises the psychopathological science deployed to enforce this, a firmly embedded Protestant culture of sinfulness managed by self-moderation is, by contrast, endorsed. Introduced as a 'blank', her 'feelings' are shaped to outwardly fit a cultural contingent set of permitted responses. Whilst Lucy's narrative is 'heretic' (a word whose use is an ironic nod towards Catholicism as it follows her desperate visit to the confessional and Père Silas), her rigid self-control may be configured partly in these religious terms whereby she is outwardly dutiful and unassuming, but inwardly suffering.

Reflecting on the marriage of Dr. John Graham Bretton and Paulina, Lucy musingly espouses a Calvinistic view of Graham as a 'born victor', wherein the couple are 'nature's elect, harmonious and benign; men and women mild with charity, kind agents of God's kind attributes' (433,436). Of course this leads Lucy to open ruefully her next chapter with the line: 'But it is not so for all' (438). And thereafter she marshals her favourite intertext, *The Pilgrim's Progress* with suitably high-blown metaphors drawn from battles and arduous journeys, suggesting that life is a testing struggle: 'Tired wayfarer, gird up thy loins, look upward, march onward' (438). The tone is resigned. Tellingly Lucy is buoyed into harshly thinking that the emotion shown by her Labassecourian pupils at M. Emanuel's absence that morning is 'not of much value; it was only hysteric agitation'; she by contrast would never stoop to such a display of impropriety (439). In the end, Lucy is told by M.Paul, 'Remain a Protestant. My little English Puritan, I love Protestantism in you. I own its severe charm. There is something in its ritual I cannot receive myself, but it is the sole creed for Lucy' (494). Lucy learns to love him in his absence, but his own ambiguous fate is less important to her than her own continued reliance on this creed.

Chapter Four: ‘The Monomaniac’: Topical villains in *The Ladies Cabinet of Fashion, Music and Romance* (1836) and *Chambers’s Edinburgh Journal* (1852)

Alongside its appearance in the two or three-volume and serial edition novels, monomania was also published in a clutch of mid-nineteenth-century short-form fictions.¹ Given its plasticity, the ‘short story’ genre (a term coined much later in 1884 by American Professor, Brandon Matthews) is an elusive form.² Its nineteenth-century guises were especially so: it could be styled as a sketch, single-episode tale, prose tale, short narrative, part of a series linked by an interconnecting narrator, or as a short form serial of just two or three editions. As Beth Palmer notes, ‘It is almost impossible to generalize about a genre that led some writers to use appealing clichés and well-worn tropes and others to experiment with content and style’.³ Unlike the serial novel, short fiction commanded no allegiance and had to work hard to hold the reader’s interest. With this in mind, here I examine two lesser known stories of short-form from the fictive worlds of romance and detection, and consider how they incorporate a psychiatric idea.

In a move from features containing it as a courtroom ‘fact’ to its use as a fictionalised trope, monomania’s inclusion in these stories amplified its association with controlling husbands, masculine wrong-doing and crime. Indeed its metamorphosis offers a textbook illustration of what Richard D. Altick describes as ‘topical realism’ or the fictive ‘glare of the present’.⁴ These were stories of the moment, both entertaining and ostensibly instructive. As a neologistic madness monomania had a double appeal, not only to the medically curious but also to the wider audience for whom fictive madness had always been a proven source of fascination. Unlike *Mary Barton* and *Villette*, these stories occasionally announced their more immediate interest in monomania in their titles (both stories examined in this chapter are entitled ‘The Monomaniac’, similarly Wilkie Collins’s short story published in *Fraser’s* in 1855 was entitled ‘Mad Monkton’). The diseased mind also offered a rationale of sorts for their

¹ See appendix (i) which shows a comprehensive list of nineteenth-century fiction explicitly including the terms ‘monomania’ or ‘monomaniac’.

² See Dean Baldwin, ‘The Tardy Evolution of the British Short Story’, *Studies in Short Fiction*, 30: 1 (Spring 1993), 23-33, 31. American Professor of Literature, Brandon Matthews was the first to name and codify a theory of the short story in a *Saturday Review* article in 1884. This extended Edgar Allan Poe’s idea that the short narrative should have a ‘single effect’.

³ Beth Palmer, ‘Prose’, in *The Routledge Handbook to Nineteenth-Century British Periodicals and Newspapers*, eds. Andrew King, Alexis Easley, and John Morton (London: Routledge, 2016) pp. 138-150, 144.

⁴ Richard D. Altick, *The Presence of the Present: Topics of the Day in the Victorian Novel* (Columbus: Ohio State University, 1991) p. 50.

athletically paced, bizarrely motivated and erratic action. In the two stories I consider here (and also in Dinah Craik's 'The Double House' which I explore in Chapter Five), the revelation of the villain's pernicious malady is central to the plot's exposition, offering a 'scientific' analysis of what is a rapidly escalating inclination towards weird and horrifying behaviour. These developing domestic associations and monomania's increasing fictive prevalence amongst middle-aged men suggest that this early sensational reversioning had wide saleability. This trend typifies monomania's second phase.

To explore this development I focus on two stories which emerged from strikingly different publications marketed to different demographics. The first example is 'The Monomaniac', an anonymously authored story serialised in three monthly issues in *The Ladies' Cabinet of Fashion, Romance and Music* (1836), which was subsequently adapted (or largely plagiarised) and re-published as 'Medfield, Or The Monomaniac' in 1843 in *The Novel Newspaper*.⁵ *The Ladies' Cabinet of Fashion, Romance and Music* was aimed at leisured, middle-class women readers. My second example, also 'The Monomaniac', was written by the pseudonymous Thomas Waters (actually journalist William Russell) and published in *Chambers's Edinburgh Journal* in 1852 and later included as part of the collection *Recollections of a Detective Police-Officer* (1856). As the integrating narrator, Waters pulled the collection together by offering insights into the ruses and ploys of the new profession of the Police Detective.⁶ *Chambers's* was marketed at aspirant working and lower middle-class readers of both genders.

According to Kathryn Ledbetter, *The Ladies' Cabinet of Fashion, Music and Romance* (1832-70), and its rival the *New Monthly Belle Assemblée* (1834-70), dominated the British women's periodicals market in the mid-century. As Ledbetter notes, in many ways they ran articles which confirm conventional gender stereotypes: pieces on fashion, recipes and needlework. However they also 'aggressively examined topics such as women's work, philanthropy, education, equality, and social issues'.⁷ The magazine also featured colourful fashion plates, literary reviews and short essays on general knowledge. However *The Ladies' Cabinet* appears to have been run on the assumption that its most saleable commodity was anonymous romantic literature and it offered more than its competitors: running alongside the three issues (February, April and May 1836) carrying 'The Monomaniac', other stories included 'Love's

⁵ 'Medfield, Or The Monomaniac' ran as an accompanying piece to a novella entitled *Woman An Enigma; Or, Life and its Revelings* (1843) by the American writer Maria Jane McIntosh in publisher Norman Bruce's *The Novel Newspaper* (V. 322). The year of publication (1843) suggests that the story was re-issued to cash in on interest in the disease generated by McNaughtan's trial.

⁶ *Recollections of a Detective Police Officer* by 'Waters' (also published in New York as *Recollections of a Policeman* (1853)) has been uploaded to the Internet Archive by the Bodleian Library and can be accessed at: <https://archive.org/stream/recollectionsad00russgoog#page/n240/mode/1up>

⁷ Kathryn Ledbetter, 'Periodicals for Women' in *The Routledge Handbook to Nineteenth-Century British Periodicals and Newspapers* ed. by Andrew King, Alexis Easley, and John Morton (London, Routledge, 2016), pp. 260-275, 260.

Ordeal', 'Love and Glory', 'Leaves from the Notebook of an Old Bachelor' as well as original poetry such as 'The Rose in Winter' or the more light hearted 'Is He Rich?'. One essayist in the April 1836 issue, in a piece entitled 'Novels and Novel Writers' lamented the decline of Walter Scott, a writer of 'moral character', and the rise of writers such as the anonymous author of the widely read *Vivian Grey* (Benjamin Disraeli), a work which would leave 'injurious impressions' and a 'depraved appetite' for more of the same.⁸ Regular monthly columns on 'London Fashions for the Month' and 'Paris Fashions for the Month' included tips on topics such as which fur mantelet to buy (sable, grey squirrel or kolinsky) and the fashionable size of one's hat or bonnet brim. Features of this nature on luxury consumption slowly ebbed to be replaced by more items on practical matters of household management and as Ledbetter notes, in the mid-century women's periodicals slowly became a more useful part of the middle-class woman's everyday life. When discarded by their mistresses they were probably appropriated by female servants.⁹ An analysis of an issue of *The Ladies' Cabinet* in 1851 reveals that 'seventy-six percent of the pages were devoted to fiction, eight percent to general knowledge or history, thirteen percent to fashion, ... two percent to poetry'.¹⁰ They were also a significant vehicle for women as producers of copy: edited by two French literary women, (sisters) Margaret and Beatrice de Courcy, *The Ladies' Cabinet* was not alone in acting as a conduit for female writers, and as Ledbetter observes, Ellen Wood, Mary Elizabeth Braddon and Letitia Elizabeth Landon all either owned or edited women's periodicals.¹¹

The author of 'The Monomaniac' is elusive. To date a list of contributing writers to *The Ladies' Cabinet* prior to the 1850s remains to be compiled. Tantalisingly, the story is signed off by 'E.R.', a writer whose identity remains a mystery. Voiced by a male intra-diegetic narrator the story, whilst distinctly anecdotal in tone, is littered with literary, scientific and topical references whose didacticism can feel a little heavy-handed. These underpin the publication's partly educational *raison d'être* whereby women might improve their knowledge in order to become more conversationally engaging and provide, what Jeffrey A. Auerbach calls, 'an Edenic sanctuary for their corrupted working husbands'.¹² This instructive content was not however simply determined by editors and authors, but was included because it appears that this is what upper middle-class women wanted to consume. In other words, it sold. Auerbach describes this as a 'symbiotic' relationship between producer and consumer or put another

⁸ 'Novels and Novel Writers', *The Ladies Cabinet of Fashion, Music and Romance*, 1 April 1836, p. 242.

⁹ Ledbetter, 'Periodicals for Women', p. 264.

¹⁰ Jeffrey A. Auerbach, 'What They Read: Mid-Nineteenth Century English Women's Magazines and the Emergence of a Consumer Culture', *Victorian Periodicals Review*, 30:2 (1997), pp. 121-40, p. 126.

¹¹ Charles Carter, Curator at New York Public libraries, suggests in 'Romantic Interests: Love (and Music! And Fashion!) in the Time of Cholera', www.nypl.org/blog/2011/08/26/love-and-music-and-fashion-time-cholera that these two women may, in fact, be 'textual entities'. However, evidence for this is limited to an entry in the *British Museum Catalogue for Printed Books* (1882) which lists them as pseudonyms.

¹² Auerbach, p. 260.

way, 'the pursuit of profits and pleasing the readership', noting that without a rich patron to bankroll their magazines, producers urgently needed this symbiosis to work.¹³ How this might affect the presentation of a newly coined psychiatric disorder is my particular point. The incentive to ensure it that it was, on the one hand, thrilling, and on the other, to suggest its relevance as a potential disorder of the middle class rather than, as Gaskell would maintain a decade or so later, the product of materially impoverished lives, is in evidence in the text.

In summary, the tale itself describes the narrator's developing acquaintance with a magistrate and defeated parliamentary candidate, Charles Oldfield. Although his name suggests old and native respectability, nonetheless we quickly surmise that he is the titular monomaniac. Cultivated, wealthy, living on a fine country estate, 'possessed of science, knowledge, and courteous manners', he is handsome with 'a finely arched forehead' and 'features moulded with more than usual regularity'.¹⁴ However, despite this geometrically fetching exterior, the narrator notes that he was also 'anxious' and occasionally 'a shade of alarm would pass over his countenance' (*LC*, February, 76). The story's scientific and thematic interest in the workings of the nerves, sensory experience and the mind, is introduced via sentences such as: '[Oldfield] repeated to me as we sat one day together in the twilight the ballad of Thomas the Rhymer, in a fine impressive manner, which even now vibrates on my nerves whenever I recall it to mind' (*LC*, February, 77).

Four incidents demonstrating Oldfield's sensitivity towards the mistreatment of animals serve to illustrate the narrator's belief in his developing mental aberrance. This was a topical matter as Britain had passed its first Cruelty to Animals Act in 1835 after lobbying from the Royal Society for the Prevention of Cruelty to Animals. This act outlawed some of the more brutal Georgian animal sports such as bear-baiting and cock-fighting which had begun to appal the sensibilities of educated urbanites. Opposition to the bill couched it as the beginnings of a systematic encroachment on hunting, gentlemanly sports and the traditions of rural life. Oldfield is therefore framed as an eccentric in his adoption of views which support this new liberal-minded cause. Indeed, singularly failing to conform to the stereotype of a land-owning huntsman, conversely he hyperbolically remonstrates with the narrator for firing his fowling piece and killing a crow; is mortified when the narrator 'impales' a worm on a hook whilst angling, quoting the landscape poetry of James Thomson to embellish his aghast admonishment; visits a butcher with the express purpose of buying meat for a stray hungry

¹³ Auerbach, p. 122.

¹⁴ Anon., 'The Monomaniac', *The Ladies' Cabinet of Fashion, Music and Romance*, February, 1836, p. 76. Subsequent references to this story are included in parentheses in the text, with the abbreviation *LC*, month of issue and page number.

dog, and pays a waggoner a crown to lighten a horse's heavy load.¹⁵ Challenged by the narrator that this all indicates a very strange, 'peculiarity of character', Oldfield 'acknowledged immediately that his humanity might seem in many instances overstrained and excessive, and sometimes perhaps affected [but he had] been disciplined to it by a mysterious cause' (*LC*, April, 258). Thus concluded, the topical matter of animal rights is placed to one side, for the introduction of a ghostly explanation as to the cause of Oldfield's 'excessive' humanity.

Admitting that during his marriage he was a man of 'strong passions', possessing a temper that 'brook'd no control' and a 'pugnacious spirit' which made his wife tremble, he repeats her impassioned death-bed plea to him:

Promise me that you will keep a strict watch against that severity and impetuosity of temper which make you less useful and less beloved in the world than the qualities of your mind and heart would otherwise make you (*LC*, April, 260).

Bereft following her death and initially chastened by her dying request, Oldfield relates how he learned to subdue his manner. However, as a candidate for a public office, he describes how a personal attack on his character in a newspaper, 'with that coarse invective, too much indulged in by the press' (*LC*, April, 260), prompts angry feelings of intense scorn which he fails to control as he sets about writing a bitterly derisive riposte to the newspaper in his study. While engaged in writing this letter, and just as he is about to launch into a particularly rancorous section of invective, he feels a 'palpable pressure [...] as if the fingers of a female hand were laid on my own' (*LC*, April, 261). Unable to account for this sensation scientifically via various experiments in which he meticulously checks the room and repeats the task under different conditions, Oldfield is confounded, especially when the same experience recurs every time. Because the sensation is linked to touch and is therefore a 'palpable truth', Oldfield begins to conclude that the spirit of his departed wife is restraining his writing, and more specifically, warning him to contain his volatile temperament. Matters only worsen when, obliged to make a speech to an assembly of those who had supported his candidacy for election, he begins to rail against his opponent. Raising his voice and beginning a vehement 'philippic', he feels the sensation of someone tugging at his sleeve, and when he does not desist in his angry speech, a cold, rigid grasp violently takes hold of his throat. Hastily he exits, leaving his watching supporters dumbfounded. Concluding his tale, he confesses to the narrator that, 'this perpetual restraint upon [his] actions, this sense of a presence which checks and chastises what

¹⁵ The exact lines he cites are from James Thomson's lengthy landscape poem *The Seasons* (1730), which was reproduced in lavish editions in the mid-century and seems to have often been cited in gentlemen's sporting periodicals such as *The Complete Angler*. They are: 'Let not on thy hook the tortured worm/ Convulsive, twist in agonizing folds!'

is wrong' is now the bane of his life. The narrator concludes by diagnosing Oldfield's condition:

I endeavoured to reason with him on the subject of his story, and to show him that what he had experienced was only a delusion of the imagination, a *monomania*, as it is termed by the physicians [...] a diseased relation between the mind and one of the senses, to which a man of the soundest and clearest judgement might be subject (*LC*, May, 297).

However Oldfield is left unconvinced by this explanation, insisting that he cannot set aside the evidence of the 'least fallible of our senses, the sense which conveys to us the most certain information of the world about us' (*LC*, May 297). At the end of the story, the reader is informed that the narrator received a final letter from the haunted man, 'somewhat melancholy in its tenor' and complaining of impaired spirits, after which, some months following, he read of his death in a newspaper obituary. No cause is given for his death but the inference of overwrought nerves is clear.

Opting for an unusual definition of monomania as a condition typified by tactile hallucinations, the narrator insists that 'the evidence of the most scrutinizing and least fallible of our senses, the sense which conveys to us the most certain information of the world about us' (*LC*, May, 297) confirms his reluctant belief in the supernatural presence of his dead wife's hand. Paradoxically, his scientific empiricism is marshalled to support the possibility of such a phenomenon, and simultaneously to query the suggestion that his wits are unsound. It seems probable that the writer of 'The Monomaniac' was highly educated and familiar with current theories of mind. However the narrator's subsequent diagnosis of monomania, whilst offering a convenient sense of closure in which the whole story is alleged to be the deluded tale of a man who imagined his wife's ghost, does not fully pin the narrative down. Whilst Oldfield's monomania ostensibly concerns his belief in the spiritual presence of his dead wife (that being the one thing with which he is obsessed), it is also an obsession with a distinctly moralistic undercurrent.

In greater part the story's real interest lies in the extent to which women can discipline their husbands. Oldfield's earlier mistreatment of his wife, his excessive anger and 'fierce and imperious temper', comes back to haunt him as a maddening regret. Her death-bed remonstrations about his behaviour allow the story to be framed as a domestic morality tale. Although he finds his dead wife's restraining influence upon him a confounded nuisance, Oldfield certainly learns his lesson. The underpinning message upbraids tyrannical husbands, suggesting that restraint, a mildness of manner and never raising one's voice, are the correct attributes of a gentleman. Added to this, and perhaps satisfyingly for *Cabinet* readers, the wife

manages to enact her revenge, albeit rather belatedly from beyond the grave, in a string of embarrassing public humiliations. Borrowing its subject-matter from topical issues besides monomania, such as animal rights and scurrilous contemporary journalistic practice (when Oldfield is unfairly denounced by a local newspaper during his parliamentary candidature), this domestic morality tale is also ‘mashed’ with a ghostly, supernatural visitation which is (unsuccessfully) scientifically analysed by Oldfield. The story thus concludes as a rather heady generic mix.

In 1843 amidst newspaper stories detailing McNaughtan’s trial, Oxford’s assassination attempt and the monomaniacal intruder at Buckingham Palace, Fleet Street publisher Norman Bruce opportunistically re-issued ‘The Monomaniac’. It ran as an accompanying piece to a sentimental American novella, *Woman An Enigma*, by Maria Jane McIntosh in *The Novel Newspaper*, a publication which generally reproduced abridged versions of popular, best-selling transatlantic literature. Re-naming the story, ‘Medfield, or The Monomaniac’ and re-locating the action to New York, its content was otherwise wholly plagiarised. Because the story appears with no named author this tampering would not have infringed any upon moral authorial rights. Indeed the trend towards named authors, who might develop and cultivate a following, ensured that unattributed pieces like ‘The Monomaniac’ would diminish and eventually disappear.

Chambers’s Edinburgh Journal (1832-1956) was a successful weekly miscellany aimed at the upper end of the cheap magazine mass market. Pitched against *The Penny Magazine* and therefore offering competitively good value for its sixteen pages, it sold for one-and-a-half pence, appealing to a broad base of the aspirant working class and middle-class readers alike. Amongst the country’s most popular periodicals, in 1849 its print order was in excess of 64,000 copies of which an average of 99% of copies were sold.¹⁶ The Chambers brothers were ‘canny’ and their periodical was to become the only weekly of its type to survive the 1840s all the way through to 1956.¹⁷ The ‘direct inspiration’ for *Household Words*, its aspirant tone is reflected in the titles of its ‘Miscellaneous Articles of Instruction and Entertainment’ such as ‘Claret and Olives’ and ‘Things Talked of in London’, and its essays on popular science such as ‘Cooling the Air of Rooms in Hot Climates’, ‘Insect Wings’ and ‘Crustacea and Their Exuviation’.^{18 19} Whilst it tended to run reprints of previously published classics, these were

¹⁶ See Table 1 in eds. Joanne Shattock and Michael Wolff, *The Victorian Periodical Press: Samplings and Soundings* (Leicester University Press, 1982) p. 236.

¹⁷ Shattock and Wolff, p. 256. See footnote 23.

¹⁸ John Sutherland, *The Longman Companion to Victorian Fiction*, 2nd edn. (London: Routledge, 2009) p. 111. Sutherland notes how Dickens attempted to emulate *Chambers’s* with *Household Words*.

¹⁹ Titles all taken from 1852 issues of *Chambers’s*.

not inexhaustible and, from the 1850s, international copyright agreements were tightened. *Chambers's* therefore also published more original fiction, although it avoided 'cheap', popular gothicised horror and Newgate-style crime stories.²⁰ The impetus to innovate and produce new kinds of fiction that addressed the interests and anxieties of consumers in a form that left them wanting more was a pressing economic necessity.

Stories by 'Waters' which first appeared in 1849 in *Chambers's* were among the first examples of 'detective stories', or more particularly, of 'police casebook literature': a further eleven appeared over a period of four years and they were extremely popular. This new genre developed in the 1860s and 70s with the publication of other memoirs or 'reminiscences' by detectives such as the real James McLevy (*The Sliding Scale of Life* (1861)) and the fictional James McGovan (*Brought to Bay, or Experiences of a City Detective* (1878)).²¹ The adoption of the pseudonym 'Waters' will have been seen by many readers as a discreet necessity in order to preserve the identity of a genuine officer. Although this was not the case and the 'recollections' were in fact ghosted by the journalist William Russell, it had the fortunate effect of suggesting an authentic documentary account which the anecdotal tone of the stories only served to strengthen. The inauguration of the 'Detective Department' of the Metropolitan Police had taken place in 1842 and, according to Martin A. Kayman, 'detective fiction is seen by many critics as a literary reflection of, if not propaganda for, a new form of social administration and control based on state surveillance.'²² In the Preface of the collected edition of *Recollections*, the text's mission to bring this respectability to police detection is explicit, for example when 'Waters' laments 'the very different position occupied in the social scale of this country, occupied by the War and Peace Soldier – the Bayonet and the Baton' and he therefore makes no apology for placing before the public sketches which are instructive of the 'domestic warfare constantly waging between the agents and breakers of the law'.²³ The Preface is also at pains to stress that the law is no longer built on an outmoded premise of 'might is right', but with the advent of the 'Peace Soldier' is now an egalitarian force for good, a notion which would have endeared 'Waters' to his readership. These supposedly true-life memoirs of the police detective 'Waters' therefore helped to build up a sympathetic public identification with the still partly distrusted figure of the detective policeman, and hence with the process of detection itself. 'Waters' helped to combat 'contemporary prejudices against detectives as vulgar spies who threatened privacy and liberty, by making police detection a

²⁰ Lorna Huett, 'Among the Unknown Public: Household Words, All the Year Round and the Mass-Market Weekly Periodical in the Mid-Nineteenth Century', *Victorian Periodicals Review*, 38:1 (Spring 2005), 61-82, p. 66.

²¹ Martin A. Kayman, 'The Short Story from Poe to Chesterton' in *The Cambridge Companion to Crime Fiction*, ed. by Martin Priestman (Cambridge: Cambridge University Press, 2003), pp. 41-58, 42.

²² *Ibid.* p. 44

²³ William Russell, *Recollections of a Detective Police-Officer by 'Waters'* (London: J. C. Brown, 1856), p. v.

gentlemanly profession'.²⁴ As Heather Worthington explains, Waters is a 'man of good birth who in his youth is the victim, not the perpetrator, of crime'.²⁵ Despite having fallen on hard times at the hands of professional gamblers and cheats, Waters maintains the manners of a gentleman: he can speak French, wears gentleman's attire and has a supportive wife, Emily. He thus is firmly on the side of social order. His social distance from the habits and occupations of criminals marked a significant change in the narrative figuration of the police-detective. Worthington argues that the text's narrative style uses a middle-class register and does not attempt 'to reproduce working-class dialogue or thieves' cant, nor does it aspire to the convoluted conversational style of the upper classes commonly depicted in fiction' and this gave him a wide appeal.²⁶ Waters speaks just like his middle-class readers, and frames his detective work with details of his domestic life that reinforce his bourgeois respectability and the sense of values shared with the reader. Thus when he uses the developing vocabulary of forensic psychiatry in talking about monomania, he makes it part of middle-class discourse. In this story being alert to the criminal presence of monomaniacs is both an heroic public service and also impressively situated at the cutting edge of detection.

With the advent of police casebook literature the 'criminal' also changed from the version previously offered in the glamourized criminal narratives of the Newgate School. He increasingly became an object of rational, scientific, and in this example of Russell's fiction, psychological, investigation. His disruptive (and pathological) force served to throw into relief the stabilizing forces of right-minded social order which were restored with his unmasking, here performed as a 'diagnosis'. This version of criminality was not styled as brave or rebellious or as championing social justice nor is it a symptom of a pathogenic environment as in *Mary Barton*. The 'criminal' represented in 'The Monomaniac' is emotionally aberrant. Existing within the domestic realm he is both recognisable and familiar yet simultaneously other, which brings an uneasy, unsettling sense to the narrative which was set to become sensationally shocking in its more fully developed incarnations. In the story a visiting doctor's medical expertise functions to endorse the sharp, insightful intellect of 'Waters'. This link between detection and medical expertise would endure in detective fiction and served to mutually reinforce the professionalism of each, most famously imagined by Conan Doyle. Thus readers of these short stories were being eased into a whole new genre of fiction despite the trepidation the middle class may have felt towards detectives intruding upon the sanctity of the home. As a *series* of stories, Waters's 'recollections', were differentiated by topical

²⁴ Martin A. Kayman, p. 42.

²⁵ Heather Worthington, *The Rise of the Detective in Early Nineteenth-Century Popular Fiction* (Basingstoke: Palgrave, MacMillan, 2005) p. 140.

²⁶ *Ibid.* p. 144.

themes of the day and authenticated by the proximate journalism which dealt with ‘facts’ of these topicalities.

Acknowledging in the opening paragraph that the case he is about to relate is more ‘medical’ than ‘criminal’, Waters opens the narrative authoritatively, stating that the story’s ‘general truth will hardly be questioned by those who have had opportunities of observing the fantastic delusions which haunt and dominate the human brain in certain phases of mental aberration’.²⁷ The action is set in Mile End in 1831. Waters describes how he and his wife moved into lodgings in the house of one Mr Renshawe, known to him via a mutual acquaintance. It swiftly transpires that their new landlord has in the past been an inmate of a private lunatic asylum and Waters confidently warns the reader that he and his wife very quickly sensed that his recovery was not complete, despite the fact that they did not have ‘a satisfactory reason for such a belief’ (*CEJ*, 259). Emily’s instinctive unease is significant here, as Renshawe’s attitude to women is key to the narrative. The reader is alerted to a possible cause for Renshawe’s disquieting manner in the shape of a portrait in his sitting-room of a young, mournful woman who was his former lover. On closer inspection a rather macabre inscription reveals: ‘Laura Hargreaves, born 1804; drowned 1821’ (*CEJ*, 260).

The focus shifts to fellow husband and wife tenants, the Irwins. George Irwin is a sickly man suffering from pulmonary consumption, while his wife, Ellen, is a beautiful young woman who tends to her husband and their small son patiently, although with an occasionally sad, ‘mournful’ look. Musing upon the remarkable coincidental likeness between Ellen Irwin and the sitting-room portrait, Waters is disturbed by Renshawe, sinisterly lurking and previously unseen in a doorway, who uncannily remarks, ‘You too have at last observed it then?’ His demeanour is considerably transformed: ‘strangely gleaming eyes’, a curling lip, excited tone, erratic gestures, maniacal laugh and a pallid complexion all suggest a sudden, rather villainous, abrupt insanity (*CEJ*, 260). At the moment that he reveals that he believes Ellen Irwin to be the living incarnation of Laura Hargreaves, a wailing sound is heard from Irwin’s sick-room melodramatically suggesting that George Irwin is in his death throes. However the sudden arrival of a medical doctor downstairs sends Renshawe darting off to his room, which he bolts and double-locks. Alarmed, Waters arranges with the physician that he should return the following day to examine Renshawe, to confirm the latter’s suspicion that this is undoubtedly a case of monomania.

²⁷ William Russell, ‘Recollections of a Police-Officer: The Monomaniac’, *Chambers’s Edinburgh Journal*, 24 April 1852, pp. 259–263, 259. Subsequent references to this story are included in parentheses in the text with the abbreviation *CEJ* and the page number.

During this appointment Renshawe suppresses his evident ‘terror’ in the face of the doctor’s diagnosing eye and in favour of a ‘simulated composure’, making light of his previous behaviour. However when the doctor dramatically reveals the portrait and remarks upon its likeness to Ellen Irwin, Renshawe is mesmerically transfixed as ‘like the Ancient Mariner, [the doctor] held him by his glittering eye’. Following an interval of some weeks, during which time Waters vigilantly keeps a watch upon their strange landlord, matters escalate when an agitated Mrs Irwin tells Waters that Renshawe has confronted her with the bewildering claim that she is his former lover, Laura Hargreaves, and asked her to marry him. Driven by his delusion, Renshawe is convinced that the only thing causing her to hesitate over accepting his proposal is the existence of her son, a child who closely resembles his father Irwin. With this scant preparation, the narrative takes an abrupt turn when it is revealed by Waters that a few days later the river Lea is being dragged for the body of this little boy whose hat was been found inexplicably floating there. Renshawe has disappeared and is therefore implicated in the child’s apparent murder. However that night the villain returns to the lodging house in a drunken stupor. Confronted by Waters and a distraught Mrs Irwin, climatically he stumbles backwards and falls down the stairs. Before his death, and with blood gushing from his mouth, Renshawe reveals that the boy is alive and he only intended to use his knowledge of his whereabouts to bribe Ellen Irwin into marriage.

Intended to shock, and rivalling the dizzying pace of a ‘penny blood’, the story frames Renshawe’s monomania as a morbid fixation. Thrown into domestic proximity with one another in the authentically located lodging houses of the East End, the tale exploits an anxiety about spying, and in this case (implicitly), sexually predatory neighbours, whose behaviour might erupt at any moment into acts of ferocity and violence. While not licenced to intrude upon acts of marital violence which would have been considered taboo, ‘Waters’ can nonetheless legitimately investigate crimes of which married women and their children are the victims. In this case the perpetrator of such crime, Renshawe, is damaged by a traumatic emotional history (his former lover’s death by drowning) and therefore although largely unsympathetic, the reader is given a cause for his monomania. As a villain he is unbalanced, exhibiting a pathological version of sentiment. But in terms of monomania’s arc, he is not fully monstrous: the boy-child is found alive, he returns to the lodging house drunk and beleaguered, and his comeuppance arrives in the form of an undignified stumble down the staircase.

'Waters' was particularly prolific and profitable in his day.²⁸ Although *Chambers's* 'The Monomaniac' might be considered rather hurried in execution, it does exhibit a literary trend which would evolve into the later, more finessed works of Sensation (and also detective) fiction. On the arc of literary monomania it sits at its apogee. Taken as part of the ephemera of the day, the thematic inclusion of the mind disease might catch the eye of the reader as they perused the content of their weekly periodical. With their eyes firmly fixed on the marketplace, commissioning editors and practiced producers of copy would have had a writerly instinct for what helped shift their publications. According to Richard D. Altick, specificity and topicality helped writers to guarantee the 'truth' of their fiction and to reassure the reading public that what was before them was 'realistic'. Particularity of description, he argues, helped to 'neutralize the scrupled suspicion with which the puritanical regarded all works of the imagination'.²⁹ Appearing in short thriller pieces in the mid-century as part of an emerging discourse of sensation, monomania's inclusion enabled journalists and professional writers to signal that their work had a 'modern', up-to-the-minute tone. Simultaneously it also offered the type of 'excess' traditionally associated with working-class melodrama, 'penny bloods' then 'penny dreadfuls' and 'shilling shockers' thus helping to win over a wider, growing readership whose tastes had erred towards the more lurid, but who might now be tempted towards a more scientific, informative rendering of the criminal. Whilst newspaper accounts supplied credibility to stories of crime and murder, fiction assumed a didactic function in familiarising their readers in more detail with the latest techniques and concepts.

The content of both stories concern the 'emergence' of a previously concealed domestic tension and the 'secrets' of the middle-class home. Both Oldfield and Renshawe are monomaniacs who become obsessive in their grief over a dead wife (whether actual or proposed). In their different ways these wives have vengefully 'come alive' to readdress (in the case of Oldfield) or reassert (as with Renshawe) the power-relations of their past relationships. Monomania works as a plot-driver producing a teasing suspense as to what the 'monomaniac' in each case will actually do. Shocking revelations of their apparently increasingly bizarre behaviours ensure that the tempo is rapid. The plots unravel in an apparently anecdotal fashion initially mediated via an intra-diegetic narrator given to addressing the reader directly. These narrators discard the supernatural as an explanatory mechanism in favour of the discourse of monomania. This first person perspective was to become typical in later works

²⁸ In 1859 a second volume of new *Recollections* was published. The advertisement at the end of this book claimed that 'above 75,000 copies have been sold of these thrilling and exciting "Recollections"'. In the Preface Waters records that 'the very flattering reception' to the first volume has induced him to write a second. It was advertised three times in *The Times* where Russell worked as a journalist. See Eric Osbourne, introduction to 'Waters', *Recollections of a Detective Police- Officer* (London: Covent Garden Press, 1972).

²⁹ Richard D. Altick, p. 43.

written from the private eye's perspective as s/he unravelled the puzzle of a murder or crime. In *The Ladies' Cabinet* however, midway through the narrative, when the tale is most concerned with suggesting the possibility of a ghostly haunting, Oldfield narrates the action voicing a masculine scepticism about the pseudo-supernatural power of his wife. Although he tries desperately to resist her power, and indeed this explanation of the strange events, the text preserves it by demonstrating that his tactile haunting cannot be explained by physical science.

Other striking commonalities include the characterisation of the 'monomaniacs' as new neighbours or acquaintances who subsequently become a source of intrigue, thus ensuring that the 'villain' is not a known criminal but an ordinary and superficially conventional member of society. All of the characters are firmly middle-class thereby instructing as to the alleged warning signs of monomania and, crucially linked to this, the importance of males appropriately managing their emotional (and, as is implied at times, physical) behaviour in their relations with women. They also include a symbolically odd and unusual occurrence early on in the narrative to foreshadow and prepare the reader for the wider oddness about to unfold: Oldfield's radically changed attitude to animals and Renshawe's hypnotically altered behaviour in the presence of his wife's portrait. In their inclusion of monomania these stories were not just catch-penny and opportunistic. Kate Flint's broader observation on later Sensation Fiction that its disruptive potential lay in '... the degree to which it made its woman readers consider their positions within their own homes and within society' is equally pertinent in relation to these proto-Sensational pieces. Socially respectable façades of decorum are shown to thinly veil tumultuous emotions so that apparently dull and regular existences are revealed to be not just eccentric or quirky, but pathological. Weird behaviours seemingly appear out of the blue and as Flint puts it '...the structures of anticipation and abrupt revelation ... show up the very boredom of this existence'.³⁰ Later works which include monomania, particularly Wilkie Collins's short story *Mad Monkton* (1855) which is underwritten with an anxiety about a hereditary version of the condition and Anthony Trollope's sustained study of jealousy within a deeply troubled marriage, *He Knew He Was Right* (1869) continue to associate it with a troubled masculine psyche beset by domestic and familial woe.

These stories, which are predominantly from the mid-1850s onwards, feature monomania as a masculine affliction characterised by 'unmanly' conduct. Conservatively-minded middle-class readers of *The Ladies' Cabinet* are likely to have been gently alerted to Oldfield's increasing mental breakdown via the acquisition of his new-fangled views on animal

³⁰ Kate Flint, *The Woman Reader 1837-1914* (Oxford: Oxford University Press, 1993), p. 277.

welfare, which are positioned as effeminate in contrast to the narrator's spirited and apparently healthy enthusiasm for hunting and blood sports. Supporting his ideas by the recitation of poetry and the releasing of worms intended for bait back into the wild, Oldfield's (supposedly) ridiculous behaviour strengthens this impression. Renshawe's monomania, by contrast, is positioned as 'unmanly' in the sense that he oversteps the bounds of gentlemanly conduct by harassing a young widow who is herself beyond reproach. An added child-abduction makes his behaviour unambiguously violent and criminal, as well as morally and socially wrong, thus necessitating Police-Detective 'Waters' swift intervention. The calibrating of masculine emotional behaviour, neither too delicate nor indelicate, is therefore central to a diagnosis of fictive monomania for the readers of these periodical pieces. More simply, both texts also call out men's violent behaviour to women and describe it as psychologically aberrant.

The bodily symptoms of the monomaniacs also differ in order to satisfy the different readerships of each publication. In a hangover from physiognomy, readers of *The Ladies' Cabinet* are quietly informed that Oldfield is sometimes possessed of an, '...unpleasant expression that almost neutralized the effect of [his] symmetry of features'. Beyond this his demeanour is apparently normal and his handsome exterior is only impaired by this minor distortion. It is his opinions and history as a volatile husband which mark him out as deviant. His own narrative, which forms the greater part of the story via direct speech and maintains that he has been the subject of a 'supernatural visitation' to whose guidance he has grudgingly submitted, is framed as spooky but credible, and therefore 'symptoms' of a distasteful, unsightly illness are largely absent. In the *Chambers's* piece by contrast, Renshawe's character has echoes of a villain from a penny dreadful. He lurks about in the lodging-house with 'lustrous, dilating eyes', an 'exulting laugh' and his speech trembles with 'fervency and anger', rising to a 'tiger-like ferocity' when challenged. Monomaniacal behaviour is characterised in opposition to 'Waters' heroic protection of the young widow, despite his earlier sympathy with Renshawe's apparently tragic and over-shadowed life. Because Renshawe's fantasy is not wholly inexplicable he is not flatly monstrous. His history and behaviour might perhaps be imagined as forming the basis of courtroom psychiatric testimony offered in mitigation for his crimes, signalling an affinity with journalistic accounts of the disorder. In this way the tale sits somewhere midway between the ordinary and the sensational.

Despite these differences, avoiding both the humdrum nature of commonplace insanity and any inappropriate descriptions which might taint the reputation of a respectable publication, both fictions represent monomania in a form that is sanitised and distinctly middle-class. For a middle-class audience, the 'madness' must also be middle-class both in

location and expression. The victims of the monomaniacs are both women, about whom we learn very little beyond the assumption of good moral character. Therefore although it simply would not do to offer depictions of overtly brutalising men, both are nonetheless a threat to a smoothly running domestic paradigm in which 'separate spheres' only function when finely tweaked codes of decorum are observed. Not quite as handsome as the monomaniac in *The Ladies' Cabinet*, the version offered in Waters's recollection is more urgently constructed as desperate, unpredictable, and criminal in order to consolidate the emerging link between police-work and forensic science.

The apotheosis of this middle-class domestic fictive version of monomania materialised two decades later in Anthony Trollope's *He Knew He Was Right* (1869). A detailed study of a husband's descent into a monomania of jealousy sparked by his wife's friendship with an older man, the story is packed with small details of etiquette and behaviour which contravene accepted social mores, alerting both the husband and the reader to potential impropriety. One of the first instances of this concerns the supposed lover's use of his wife's Christian name, rather than the more proper 'Mrs. Trevelyan'. Trevelyan feels forced to be 'round' with his wife, a tactic which has the effect of alienating her, and the marriage begins to deteriorate in a vortex of imagined slights and recriminations. The novel was highly topical as the Divorce Bill of 1857, which offered judicial divorce to those rich enough to afford it, had spawned a steady stream of salacious reporting in the press, offering details of deteriorating marriages. Moreover, it had given rise to the industry of the Private Detective. The unscrupulous Mr. Bozzle is hired by Trevelyan to spy on his wife. Subsequent erroneous reports from the inept detective of her alleged meetings with 'lover' Colonel Osborne serve to fuel Trevelyan's pathological jealousy. The novel brims with anxiety about the 'wretched, unfortunate and almost degrading' lot of some married, and indeed unmarried, women.³¹ Also managing to include a substantial discussion of the McNaughtan case, Trollope's use of monomania in the novel is certainly topical and extensive. However it eschews the type of free indirect discourse that offers access to sensitive introspection and, in this sense, merely gives the impression of an arrogant and superlative jealousy based on suppositions which are, in fact, wrong.

³¹ Anthony Trollope, *He Knew He Was Right*, ed. by John Sutherland (Oxford: Oxford University Press, 2008) p. 30.

Chapter Five: The monomaniac next door: Marital crisis in Dinah Craik's 'The Double House' (1857)

The appearance of imaginative stories about monomania continued long after its usefulness as a medical term was being questioned by clinicians. By the latter half of the 1850s the historical discursive context had definitively shifted and the condition was associated with eccentric criminality. Its more subtle sense of personal crisis and angst in a finely wrought, complex, middle-class bourgeois psyche, such as Lucy Snowe's in *Villette* (1853), was out-of-date. Instead its literary representation began to tend towards a secretive, middle-class, male affliction, as first glimpsed in the *Ladies Cabinet* in 'The Monomaniac' (1836). No longer commonly associated with an excess of passion needing control, the condition entered its second phase in popular discourse, characterised by impulsivity, dishonesty and dissembling. Its setting was domestic and its realisation was proto-sensational. Wilkie Collins's horror story of the unburied corpse of an insane ancestor, *Mad Monkton* (1855), which exerts a miserable curse upon the eponymous Monkton driving him into a monomania, situated the condition firmly in the family. Monomania became an hereditary taint that one needed to bury (here literally) or, at the very least, conceal from proper society. In this chapter I focus on the paracanonical Dinah Craik and her illustrative story 'The Double House' (1857) which deploys such an archetypal domestic monomaniac. It collocates the revelation of his condition with the word 'horror' (the narrator feels 'horror' on learning of his monomania, and the sufferer's wife may look on him 'with horror for ever' (173)) with no real possibility of therapy or care.¹ The story's underlying question is – what is a good marriage? And uniquely, it articulates the ideology of separate spheres in a spatially literal way in which the warm, domestic world of women, and the harsh outside world of men busily competing economically in the marketplace, do not intrude on each other at all. The resultant portrait is bleak. Its cold characterisation of married men, inexplicable until the reader is appraised of the medical explanation, tentatively asserts the high price women pay for becoming economic dependents. I shall explore exactly what Craik is saying about marriage, and more broadly, 'emotion', through an apparently pathological definition.

1.1 Background

The institution of marriage was at a significant juncture in 1857. Palmerston's Matrimonial Causes Act had established a new model of marriage based on 'contract' rather

¹ Dinah Craik, 'The Double House' in *Nothing New: Tales* (London: Hurst and Blackett, 1857). All page references are to appendix (ii) of this thesis and are included in parentheses in the text.

than 'sacrament'. Preceded in parliament by a debate between pious Christians led by Gladstone on the one hand, and Whig lawyers supported by Caroline Norton on the other, divorce finally became a secular affair. It also began a process of making it more accessible via the new (only slightly cheaper) Court of Divorce and Matrimonial Causes, where previously one had been required to ascertain a Private Bill in parliament or a complex ecclesiastical annulment.² However, there had been no intention to extend easy divorce to the masses as it was feared this might undermine family stability. According to Lawrence Stone, the Act's real significance lay in the focus it placed upon two issues for later reform: the demand for equal access to divorce on grounds of adultery by either husband or wife and the demand for the placing of a married woman's property under her own control. This 'struck terror into the hearts of most of the legislators'.³

In 1857 there were three hundred petitions, as against three in 1856, signalling that the trend for divorce amongst the upper middle classes was firmly underway. *The Times* hailed the presiding judge, the Hon. Sir Cresswell Cresswell, as the 'Confessor-General of England' and, whilst adulterous behaviour might be expected from aristocrats ('professional seducers') and plebeians ('drunkards and wife-beaters') it lamented '...the strange revelation of the secret doings of the English middle classes' who were once the 'golden mean' between these two extremes.⁴ These revelations of marital strife did not confine themselves solely to the Divorce Courts. In 1855 the national press reported in graphic detail on the murder of one Mrs Sproston by her husband, James Sproston, who had previously been a respectable, well known couple. Suffering with an alleged jealous monomania he had dramatically attacked her such that '...portions of her skull were hacked off by a cavalry sword'. One reporter added that, 'Though a tall and powerful woman, it is believed that she offered no resistance to the attack, but sunk upon her knees to ask for mercy. Her countenance in death bore a sweet and composed expression'.⁵ Owing something to lurid fictional flourishes but also to increasing awareness of domestic crime, reports such as these fuelled the general air of anxiety circulating around the institution of marriage.

Against this backdrop 'The Double House' was published in *Harper's New Monthly Magazine* in June, 1856 in the United States, followed swiftly by its London publication in the second volume of Craik's collected stories *Nothing New: Tales* (1857). With initial publication in

² See Lawrence Stone, *Road to Divorce: A History of the Making and Breaking of Marriage in England 1530-1987* (Oxford: Oxford University Press, 1995) p. 386. Stone points out that this process was only really completed in 1878 and 1886 with the Maintenance of Wives Acts which allowed a battered or deserted wife to obtain a maintenance order following which there was 'an avalanche of applications' by women.

³ Ibid. p. 375.

⁴ 'Sir Cresswell Cresswell is holding up a mirror to the age' *The Times*, 12 December 1859, p. 8.

⁵ 'Shocking Tragedy at Wheelock', *Observer*, 7 May 1855, p. 8.

the US ensuring proper payment rather than plagiarised copy, and the British collection being a catch-penny affair published hastily in the wake of her best-selling novel *John Halifax, Gentleman* (1856) by Henry Blackett, (whom she had collared at a party given by fellow Hurst and Blackett writer, Margaret Oliphant), Craik's prose was increasingly lucrative.⁶ Unlike her heroines who enthusiastically pursued husbands, she was able to remain self-supporting and unmarried.⁷ As 'the Author of *John Halifax, Gentleman*' her brand was established; reliably prolific, conventional and, a notion which I shall come back to, 'sentimental'. In total she published fifty-two books. By 1858, *John Halifax, Gentleman* had run through four editions, with over 250,000 copies sold by 1897. John Everett Millais illustrated the first cheap edition. Hugely popular amongst the newly literate and women, it marked the pinnacle of Craik's most successful decade of writing. Writing to her brother Ben in 1860 she was almost blasé: 'It amuses me somewhat that the 'run' is upon me just now I have had offers without end this year for magazines & publishers – they'd swallow anything – poor donkeys! – but I hope I have sense to see that it can't last & neither to kill myself nor write myself out – what's the use of making money – & writing trash'.⁸

In fact the money she made went in part to keep her father, who, first sent to an asylum when she was a six year-old girl, had been re-committed to the Stafford County Lunatic Asylum where he remained from approximately 1856 to 1860. At the time of this letter he was about to be released. Craik and her aunts were fearful of what her father might do when at large. As Karen Bourrier notes in her work on Craik's letters, there are hints that he had been violent in the asylum, and that he would be even more 'difficult' than usual on release.⁹ Notes recording her father's diagnosis were destroyed but Craik's understanding of contemporary ideas circulating around insanity was certainly personally informed. Her father's instability had undoubtedly cast a shadow over her childhood, leaving her destitute at the age of nineteen when he abandoned her and her younger brothers following their mother's death. Whilst I would argue that Craik's choice to characterize husband Merchiston almost exclusively by his homicidal monomania is far more than just thinly disguised biography, it

6 Elaine Showalter, 'Dinah Mulock Craik and the Tactics of Sentiment: A Case Study in Victorian Female Authorship', *Feminist Studies*, 2: 2/3 (1975), 5-23, 10. Showalter describes Margaret Oliphant's professional rivalry with Craik.

7 She did marry aged 39 (in 1865) to an editor at Macmillan's, George Lillie Craik.

8 Karen Bourrier, 'Finding a Transatlantic Audience: Reading Dinah Mulock Craik's *Mistress and Maid* in *Good Words* and *Harper's Magazine*', *Victorian Periodicals Review*, 49:1, (Spring 2016) 100-122, 107. Bourrier refers to this unpublished letter by Dinah Craik to Benjamin Mulock, October 21, 1860, Mulock Family Papers, University of California, Los Angeles.

9 Karen Bourrier, 'Narrating Insanity in the Letters of Thomas Mulock and Dinah Mulock Craik', *Victorian Literature and Culture*, 39 (2011), 203-222, p. 212.

certainly betrays her awareness of domestic cruelty and how it might be cloaked in an elaborately conceived respectability.

1.2 Summary of the story

'The Double House' has largely escaped notice in recoveries of Craik's work but is striking in its realisation of a married woman's isolation and, for the mental cruelty she endures. The narrator of events is Doctor's wife and observant neighbour, Peggy Rivers, who has been starved of excitement and is desperate for company. She opens the story recalling her life as a young married woman forty years ago when her days were spent '...loitering about the whole day, and sitting lazily at parlour windows', apparently indulging in her favourite pastime as an incorrigible curtain-twitcher (142). Craik's choice of Doctors and unfulfilled wives as emblematic of a conflicted marital union was ahead of its time. According to Tabitha Sparks in *The Doctor in the Victorian Novel*, the fictional conjugal pairing of a Doctor/Scientist and his wife was 'seemingly normalized in the 1860s as a beacon of marital crisis,' following a template, 'reflected by a rational, professional husband ... and a frivolous wife who reads too many romance novels'.¹⁰ Both the couples in this tale, the observing Rivers and the observed Merchistons, follow this template, but as Sparks notes 'the intimate relationships in this story are not between the doctors and their wives: the doctors confer professionally about their patients and about Merchiston's condition, and the wives console and support each other in the alienating role of the doctor's wife'.¹¹ While they are not separated physically like the Merchistons, the separation in the Rivers's relationship is both symbolic and discursive. Unsuccessful in her attempts to extract information from her husband, Peggy Rivers is thwarted by twin powers of what Sparks calls 'the unique strictures of medical confidentiality and masculine intellectualism'.¹²

The story's use of monomania is, as is so often the case in imaginative writing, an apparent instance of self-diagnosis and self-management, but uniquely this self-diagnosis is performed by a Doctor, and confirmed by another, as though underlining its medical veracity. Craik is at pains to suggest that this man's behaviour is anomalous and unrepresentative by using a topical signifier of mental eccentricity. In the beginning Doctor Evan Merchiston, and his 'child-like' wife, Barbara are initially and briefly 'normal'. She is the epitome of Coventry Patmore's wifely paragon, 'The Angel in the House' (1854): docile, demure and unremarkable.¹³ Rigid Victorian gender roles are inexplicably realised by the spatial separation

¹⁰ Tabitha Sparks, *The Doctor in the Victorian Novel: Family Practices* (Farnham: Ashgate, 2009), p. 63.

¹¹ Sparks, p. 65.

¹² Sparks, p. 65.

¹³ Coventry Patmore's popular, long narrative poem was published in parts between 1854 and 1862.

of the couple in the eponymous house. This is a property which consists of two houses joined together by a covered passage but with two separate entrances. Nominally together, it transpires that they have been physically apart for all but the first six months of their five and a half year marriage. Using duplicate staff and facilities their lives do not coincide beyond a mutually agreed façade of respectability. Craik's exploration of a husband's murderous inclination towards his wife, in which this living arrangement serves to protect her against his pathological bent, struggles to conceal its criticism of marriage as an institution. The illusion of respectability so craved by wife Barbara is ever more difficult to conjure given the impossibility of her being proximate to her husband. Never mind the unmentionably sexless, uncompanionable nature of such a union, or indeed its apparent pointlessness, the lack of respectability is flagged up as its most troublesome problem. And when, in the final pages of the story, Merchiston's anticlimactic death occurs, the narrator reveals that Barbara's 'days of mourning became the dawn of a perennial joy': hardly fitting for a bereaved wife, but unconvincingly predicated on the fact that this joy is caused by fondly remembering his love. Craik's reticence to criticise the superior representatives of patriarchy means that, rather inconsistently, Merchiston's monomania allowed him to love his wife whilst simultaneously being infused with an urgent desire for her death (174).

More clearly expressed is the story's angry focus on the paucity of opportunities for middle-class women to thrive in the pursuit of useful activities. The narrator describes how she became a mother during the story's course which rescues her from her previously 'dull' life, adding that a childless marriage (such as the Merchistons) is 'apt to cloy, or become a sort of dual egotism, which feels no love, sympathises with no sorrow, and shares no joy, that is strictly not its own' (150). Having befriended Barbara and discovered their estrangement when she breaks down and confesses all, narrator Peggy springs into action. Refusing to countenance this intolerable situation in which her new friend is being 'killed by inches', in a bold sisterly move, she assists the childless Barbara in planning an escape, going so far as to subversively secure her employment as a governess with her sister. But this plan is thwarted by the monomaniacal Doctor's last minute appearance as she is about to leave in the dead of night in a gig driven by the narrator, who mindful of potential gossip 'was determined that no other than myself should have the credit of eloping with Mrs Merchiston' (159). Challenging Barbara to reveal who has advised her to take such a bold step as to leave him, Peggy Rivers heroically declares that it is indeed her and that she is taking Barbara where she may live in peace. Transformed at this news, Merchiston dramatically pleads with Barbara to remain, exclaiming, 'that my wife should quit my roof to earn her daily bread – never!' (161). After (somewhat abruptly) re-avowing their love for one another Barbara agrees to remain in the

house with the key concession that her husband should accompany her to church every Sunday in order to nullify the village gossip and preserve their improvised respectability. This he duly does but at a cost; physically he deteriorates rapidly, 'his countenance, always sallow and worn, seemed to [me to] have the ghastly look of one whom you know to be inwardly fighting a great soul battle ... of all the impenetrable mysteries that life can weave, that man and his secret were the darkest' (163). Marriage does not agree with the Doctor.

At this point in the narrative, Mrs Rivers' intrusive narration digresses into what she apologetically calls a 'didactic interpolation' on mental disease. Here she paraphrases her husband, Dr Rivers' ideas, deferring to his superior understanding of such matters. His theory is that, 'every man and woman is mad on some one point – that is, has a certain weak corner of the mind or brain, which requires carefully watching like any other weak portion of the body, lest it should become the seat of rampant disease' (165). In part this serves to foreshadow Merchiston's later revelatory diagnosis. More broadly, the story's *raison d'être* – to entertain and to teach its leisured middle-class female readership – is here expressly fulfilled, as they learn about the phenomenon of domestic monomania. However, with a growing appetite for the sensational rather than the educative amongst her readership, Craik's use of monomania goes far beyond the plausibly medical. In the course of his madness Merchiston's incidental policing of the double house's separate spheres means that his homicidal monomania is figuratively enacted. His wife Barbara's identity is tyrannically crushed in order to accommodate his supposed insanity. Unable to fulfil the role of respectable wife or mother, teacher or spinster, she becomes a blank, the subject of village gossip, hiding from the pitying gaze of the Sunday congregation. Therefore although ostensibly a tale of a man who may irrationally murder his wife without apparent cause at any moment, it is also one of systematic subjugation enacted with a chilling rigidity which she is hopeless to resist. Whilst he is out every day, Barbara never ventures out, 'mercilessly put away', leading the narrator to reflect topically that the 'continual dropping that weareth away the stone' might be the greatest justification for divorce (152).

Following his wife's unsuccessful attempt at escape, Doctors Merchiston and Rivers spend more time together, during which the latter is putting into practice his exemplary and highly praised powers of scientific observation. Matters develop when Merchiston, rather suspiciously, suffers a fractured arm and leg in a fall from his horse which confines him to his bed for the ensuing five months. As has been frequently noted with regard to Craik's narratives, invalidism allows her male protagonists to become more interesting. No longer occupying a position of power they become passive and feminine. His post-fall examination by Dr Rivers forms a narrative gap, following which, his narrating wife speculates as to what

‘strange scene’ her husband has witnessed at the Merchiston house given River’s shockingly tearful demeanour on his return. The sensational inference that Dr Merchiston has wilfully harmed himself by deliberately falling from his horse is intimated. That a man should go to such lengths to manage his insane impulse is clearly designed to evoke pity but its main structural function is to initiate his invalidism. Merchiston’s bed-ridden state enables his wife to nurse him with an unhindered access she has not enjoyed in years. Her own transformation confirms that the sick room is a source of unmitigated happiness, for here she is in a position of influence over her him and ‘her eyes had a permanent, mild, satisfied light’ (167). But with his apparent return to physical strength, he becomes fearful and once again seeks to separate himself from his wife in case he inadvertently murders her. He pleads with the Rivers to take her away from him, and, at last, climatically agrees to reveal the reason for his bizarre behaviour, all the while clearly deteriorating mentally, his body ‘worn-out’ with the emotional strain. His confession that he is a monomaniac with the desire to murder his wife arrives shortly before his final demise and death, with the explanation that his weird behaviour was an elaborate scheme to avoid confinement in an asylum. Barbara can now begin a new life of joy.

1.3 Reassessing Craik: Proto-feminism?

‘The Double House’ appeared at the beginning of a period of sentimental women’s writing, which Sally Mitchell identifies from around 1855 to the early 1870s.¹⁴ It catered for the recreation of middle-class women by offering the reader the simplicity of heroines with whom they might readily identify, and fantasies of conquered adversity. This audience would have reflected the ‘disproportionate’ number of single women in the population at large, who made up 42% of females between the ages of 20 and 40 in the 1851 census. The pressure to marry at any cost is clearly challenged by the story, particularly as it is mediated by a narrator who, married herself, is able to claim some emotional expertise. Unmarried herself, Craik was to address this constituency more directly in her essays, fashioning herself as a mentor and shaping a community with shared concerns.¹⁵ In so doing she offered a challenge to the stereotype of the ‘old maid’ or spinster. This possibility of such a challenge is perhaps at odds with the regular charge of ‘sentimentality’ levelled at Craik’s writing.

Sentimentality was associated with Craik’s work by her contemporary critics with varying degrees of disparagement from the politely ambivalent to the more outrightly pejorative. In her reassessment of Craik, Mitchell defines sentimentality as ‘a display of

¹⁴ Sally Mitchell, ‘Sentiment and Suffering: Women’s Recreational Reading in the 1860s’, *Victorian Studies* 21:1 (1977) 29-45, 33.

¹⁵ See Anna Stenson Newnum, ‘Single But Not Solitary: Dinah Muloch Craik’s Vision of a Protestant Female Community’, *Women’s Writing*, 20:3 (2013), 308-324.

emotion disproportionate to the occasion of its arousal'.¹⁶ Although a dismissive word to the Victorians, since the early 1980s Elaine Showalter and Mitchell reclaimed sentimentality as a more dynamic phenomenon in the work of Craik which promoted self-dependence for women and insisted that marriage was not the only path towards a fulfilling life. Indeed Craik herself was unapologetic. In an essay first published in *Chambers's* entitled 'Happy and Unhappy Women' and later collected in her polemic, *A Woman's Thoughts About Women* (1858) she opened:

I give fair warning that this is likely to be a "sentimental" chapter. Those who object to the same, and complain that these "Thoughts" are "not practical", had better pass it over at once; since it treats of things essentially unpractical, impossible to be weighed and measured, handled and analysed, yet as real in themselves as the air we breathe and the sunshine we delight in – things wholly intangible, yet the very essence and necessity of our lives.¹⁷

For Craik then, 'unmeasurable' sentimentality was a valorising of emotion and fellow feeling. Dissociated from the 'tangible' (and by inference from capital and wealth) it had the potential to upset established norms and hierarchies. As it is, she went on to pen eleven essays in total which discuss distinctly unsentimental topics: depression, prostitution, the ageing body and, most extensively, ill-conceived marriages. In 'Happy and Unhappy Women' she observes that while unhappy men are likely to suffer a sudden morbid misanthropy or be overthrown entirely into insanity, a woman 'drags on existence from year to year with 'nerves' or 'low spirits' and the various maladies of mind and temper that make many women torment to themselves, and a burden to all connected with them' (98). Often this is due to a bad marriage, for:

There is many a bridal chamber over which ought to be placed no other inscription than that well-known one over the gate of Dante's hell: "*Lasciate ogni speranza voi chi entrate*" (Abandon hope all ye who enter here) (131).

With one point of view, rather than the ironies and complications of a multi-centred realism, and what Mitchell describes as the 'daydreamer's' lack of depth in both setting and characterisation, the folk-story binary of good and bad was comfortably preserved.¹⁸ Heroes and heroines struggled onward and meanwhile unsuitable guardians, fathers and husbands perpetuated the 'bad' - usually restrictions on thought and feeling, even whilst these 'villains'

¹⁶ Mitchell, p. 31.

¹⁷ Dinah Craik, *A Woman's Thoughts About Women*, (1858: Milton Keynes: Dodo Press, 2008), p. 97.

¹⁸ Mitchell, p. 32.

were ‘rapidly narrated and inconclusively imagined’.¹⁹ As Craik created persecuted heroines at odds with all else because they were in economic difficulty and lonely, she also pursued the sentimentalist’s necessity of moral essentialism by creating villains. Her popular fiction defined victimhood in clear opposition to unequivocal and manifest cruelty. In *John Halifax, Gentleman* the eponymous hero is introduced as an orphan seeking alms, who then teaches himself to read and write, gains promotion through devotion to duty, spends time toying with machinery, carves out a successful career as an industrialist, later becoming an M.P. and is therefore transformed into a ‘gentleman’. At various points in the story the hero is frustrated by his opposite, the Earl of Luxmore who emblemizes a corrupt, backward-looking, intransigent aristocracy. An uncomplicated narrative of self-help in which success comes as a reward to a poor man who already has integrity, unlike, for example *Great Expectations*, which explores the same ideas and has a similar arc but which is layered with irony, it has nonetheless assured her longevity.²⁰

Just as *John Halifax* captured the self-help *zeitgeist* perfectly, espousing aspiration and middle-class meritocracy, whilst also offering a shallow approach to social problems, I would argue that ‘The Double House’ performs a similar service for marriage. In the story, Craik employs her shrewd grasp of the times by creating a tyrannical, unyielding husband in Merchiston – a figure who appeared increasingly backward and villainous, reflecting the same behaviour of similar middle-class men reported daily in the press from the Divorce Courts. More complicated than straightforward escapism, the narrative articulates shared frustrations and offers ‘emotional analyses’ of women’s lot.²¹ So whilst eschewing politics and maintaining a vigilantly reverent tone about male intellectualism, Craik fashions narrator Peggy Rivers as an observer and mentor who is unable to remain silent in the face of her fellow neighbour’s suffering. Although Craik was not reissued by Virago or the Women’s Press almost certainly because of her unfashionably conventional opinions on women’s suffrage and the ‘essential’ differences between men and women, she did emphasize the importance of women’s relationships with one another and that they should strive to progress economically. In fact her reverence for patriarchy was unreflecting, merely espousing a status quo in which she might couch some of her more liberating ideas. It can be admitted that in some of the more antique passages of *A Woman’s Thoughts About Women* (1858) she did maintain that women were incapable of voting sensibly, or of being doctors, did not have an innate sense of justice and, in summary, were not as intellectually able as their ‘masters’. But she was inconsistent. Women were, for example, better writers: ‘...acute and accurate historians, clear explanators

¹⁹ Mitchell, p. 33.

²⁰ See Robin Gilmour, *The Idea of the Gentleman in the Victorian Novel* (1981: London: Routledge, 2016).

²¹ Mitchell, p. 34.

of science, especially successful in imaginative works', and she added, '*Aurora Leigh*, has proved that [women] can write as great a poem as any man among them all'.²² In this inconsistent position she remained consistent. In later life she wrote to Oscar Wilde: 'I care little for Female suffrage & have given the widest berth to that set of women who are called, not unjustly, the shrieking sisterhood – Yet, I like women to be strong & brave – both for themselves & as the helpers, not the slaves or foes, of men'.²³ Therefore in many ways a walking contradiction, given her business savvy, prodigious work-rate, independent means and sharp eye, Craik's prose is ostensibly conventional but, as I have argued, one does not have to look too closely to find an ambivalence, bordering on antipathy, towards marriage and an undisguised anger about the lack of things for women to do. Showalter observes that Craik's best-selling children's fiction *The Little Lambe Prince* is 'an allegory of Craik herself' and, in a manner similarly touched by personal circumstances, the unmarried Craik writing in the late 1850s appears to be turning out various meditations, polemical and fictional, on marriage's apparent drawbacks. The first essay in *A Woman's Thoughts About Women* is called 'Something to do', with pieces thereafter about 'Self-dependence', 'Female Professions' and 'Female Handicrafts'. By 'Handicrafts' Craik meant low-skilled working-class women's labour, a topic about which she affected to know little beyond the fact that despite their lack of 'elevated character' these women were dignified by their industry (even if repetitive and low-paid). On the whole women who worked and did something, were much better than women who did not. And significantly for this chapter's analysis of monomania in 'The Double House', men who impeded them in this fulfilment were misguided, interfering and, actually, self-defeating. In her chapter on 'Growing Old' she points out that men only respect independent women who are self-disciplined and clever whilst berating those who continue to dress 'youthfully' (by 'making a Guy of [themselves]') and cling to a sense of themselves as 'a girl' (124).

'The Double House' is narrated by a woman, whose access to 'emotions' and 'sentiment' (with an accompanying dismissal of phrenological science which she regards as 'folly') is pitted against her husband's medical training and insights. Whilst he can satisfy himself in having made an accurate diagnosis, she is the one who spots the cure to Barbara's unhappiness in a medicinal independence. Generically hybrid, the story caters for a broad range of competing discourses. There is a Gothic trace with the house operating metaphorically as in Poe's *The Fall of the House of Usher* (1839), although here we are not given cracked masonry but a concealed and adapted architecture both enabling and echoing the 'eccentric' marriage within. The narrative also anticipates the early 1860s heyday of Sensation

²² *A Woman's Thoughts About Women*, p. 19.

²³ Letter from Dinah Mulock Craik to Oscar Wilde, 17 July 1887, TAPAS Project
<http://tapasproject.org/digitaldinahcraik/files/letter-dinah-mulock-craik-oscar-wilde-17-july-1887>

fiction with the stifling domestic intrigue of the Merchistons frequently, and jarringly, juxtaposed with the Rivers' own more playful exchanges. But despite its sentimentality, 'The Double House' subversively turns the plot of the mad wife, developed in Charlotte Brontë's *Jane Eyre* (1847), inside out by adapting the device of an incipient or emerging insanity, and applying it to the husband. As it was later used in Anthony Trollope's *He Knew He Was Right* (1869) monomania is framed as a product of modernity, encompassing a contemporary anxiety about moral responsibility, the limits of masculine self-control and the undermining of wifely subservience. Asking whether a woman should always 'obey' her husband, the answer is a resounding no. Dr Merchiston's desire to control and dominate his wife can be read as anachronistic. Having first quizzed her to establish that her husband is not adulterous, the narrator then fosters her friend's 'conjugal rebellion' on the grounds that, although a woman should 'submit to any lawful authority', her particular situation might 'ruin' her 'soul'. This supports the idea that Craik's Protestant morality encompassed a liberal impulse towards active solidarity amongst women, albeit one that did not translate into any explicit calls for institutional change.

In addition, the narrative gives way to an intrusive medical realism, with its withheld and detailed psychiatric revelation as the story's final twist. This follows a sensational build-up in which emotional extremity is generated firstly by a physical response. Mrs Merchiston's breakdown and confession to the narrator is precipitated by the chance encounter with her husband in which he was 'so close that he must have touched his wife's dress', causing her to swoon, with a 'countenance as pale as death' (151). With this deathly, monstrous touch, her husband's 'monomaniacal' impulse appears like a contagion. His desire to kill her is associated with the possibility of their bodies touching. In one sense Dr Merchiston is the archetypal Victorian husband, acting as protector and financial provider and conversely his insistence on the rigidity of their separate roles, to the point of this meticulously observed spatial distance, suggests a revulsion towards her physically. The 'one point' of his madness, the desire to murder his wife, might be couched as a pitiable and incurable 'illness', a motiveless malignity managed by his saner half, but it also reads as an excuse for Craik to foreground an inexplicably cold husband. As Showalter has pointed out, this was a pattern in Craik's fiction. In *Agatha's Husband* (1853) and *Christian's Mistake* (1865) both eponymous heroines have to contend with cold husbands, and after the effort it takes to secure it, marriage seems like a very poor reward.²⁴

The story anticipates later narratives of split-personality like Stevenson's *The Strange Case of Dr Jekyll and Mr Hyde* (1886). As in Stevenson's tale the binary separations of

²⁴ Showalter, p. 7.

sane/insane, reason/unconscious compulsion, civil/criminal, and normal/deviant are firmly fixed. The difference is that Craik refuses to actually show Merchiston's darker side or 'Mr Hyde' because it is 'controlled' by his professional self-diagnosis. The reader is asked to accept that his impulse to kill is forgivable partly because, as an illness, it is not part of his self but 'other', and given his firmly middle-class medical insight, he is able to quash any unsavoury criminal propensity by applying his professional knowledge. But the fact that the story is framed as one being told to Mrs Rivers's grandchildren suggests that Craik is pitching 'monomania' simultaneously as an evil force or monster whose containment is imperative. On the one hand sympathetic to the notion of illness and an individual's powerlessness to avert its onset, Craik's text also suggests that 'monomania' is synonymous with immorality or wickedness in keeping with the generic conventions of children's stories. This is, I would argue, because monomania is more than an 'illness' in the story, it is a set of behaviours within marriage of which she strongly disapproves.

Unlike mental disorder, physical invalidism suggests internalisation of conflict for Craik. In 'The Double House' Merchiston's mental disease is weakened when his body is weak, and his suffering is presented as more pitiable. His previous presentation as emotionally limited is transformed: he watches Barbara 'adoringly', his eyes 'full of the calmest, most entire happiness' (167). In effect, his confinement to the sickroom allows her to show more explicitly the version of marriage she favours. Thus when his body is weak and Barbara is 'nurse', their relationship, because then more akin to one which is sexless and mothering, is portrayed as gentle and benign. And just as Barbara's sexuality is acceptable and unthreatening to Merchiston in this context, Merchiston himself is sexually anaesthetised because he is incapacitated, and having swapped positions with Barbara, appears 'child-like'. Showalter makes the point that often in Craik's fiction the 'defective' male might himself be a version of womanhood, an alternate persona from which either more interesting escapades can arise or a more advantageous vantage point is possible. Here he is given the advantage of feeling, and is temporarily released from his rational, unemotional characterisation. Correspondingly, in her work on representations of the disabled Brandy Schillace has argued that: 'In a culture of sexual anxiety and fears of devolution and moral decay, the physically disabled and "weak" are portrayed as strangely free from moral corruption. Unlike the cultural link between deviance and disability witnessed in the medical literature and eugenic approach to generation, authors of narrative fiction ... portray disabled characters as "purified".'²⁵ In Craik's work sentimental portrayals of the physically weak and disabled abound. Whilst individual agency and bodily

²⁵ Brandy L. Schillace, 'Curing Moral Disability: Brain Trauma and Self-Control in Victorian Science and Fiction', *Culture, Medicine and Psychiatry*, 37 (2013), 587-600, 587.

ability converge in some 'scientific', physiologically based constructions of the mind (particularly the unsound mind) where physical strength equals intellectual strength, here Merchiston's weakened body is inversely related to his moral clarity. It is precisely because the body is weak that there is room for the mind (and the will) to prevail.

In this way 'monomania' conceivably operates in 'The Double House' as a proto-unconscious. That the self is not unified here is clear and identity is abruptly discontinuous. One mental trait is operating in isolation, waging a battle with other discrete mental traits. In fact 'monomania' allows the brain to be configured as a 'double brain' or 'double consciousness' corresponding to independent halves which might be crudely sketched as 'good' and 'evil'. Contextually, the 'dual' nature of the mind was an idea which historically supported the possibilities of moral management and moral interpretations of insanity. As Jenny Bourne Taylor and Sally Shuttleworth have shown, Henry Holland's essay 'The brain as a double organ' which appeared in 1840 prompted Christian thinkers like Arthur Ladbroke Wigan to outline arguments which posited the ability of the stronger, 'moral' brain to control 'its potentially wayward other'.²⁶ Each cerebrum, Wigan argued, was 'a distinct and perfect whole' and 'the power of one cerebrum to control the other, may be indefinitely increased by exercise and moral cultivation; may be partially lost by desuetude or neglect; or, from depraved habits and criminal indulgence in childhood, and a general vicious education in a polluted moral atmosphere, may never have been acquired'.²⁷ Holland's 'doubleness' was more figurative, rejecting the 'real' duality which Wigan had boldly asserted. For Holland, 'in certain cases of mental derangement, as well as in some cases of hysteria which border closely upon it, there appear, as it were, two minds; one tending to correct by more just perceptions, feelings, and volitions, the aberrations of the other'.²⁸

1.5 Conclusion

Preserving the outward appearance of a functioning marriage on the part of both husband and wife leads to their rental of the eccentric double house. But inside this semi-detached property and marriage, his homicidal monomania is figuratively enacted. Barbara's identity is crushed and she exists only for narrative focaliser Peggy Rivers, who operates as a proxy reader by encouraging our sympathy and suggesting a fantasy of intervention. More particularly,

²⁶ Jenny Bourne Taylor and Sally Shuttleworth (eds.), *Embodied Selves: An Anthology of Psychological Texts 1830-1890* (Oxford: Oxford University Press, 1998), p. 124.

²⁷ Arthur Ladbroke Wigan, *The Duality of Mind proved by the Structure, Function and Diseases of the Brain, and by the Phenomena of Mental Derangement, and Shewn to be Essential to Moral Responsibility* (London: Longman, Brown, Green and Longmans, 1844) pp. 26-31 in *Embodied Selves*, p. 126.

²⁸ Henry Holland, *Chapters on Mental Physiology* (London: Longman, Brown, Green and Longmans, 1852) pp. 185-9 in *Embodied Selves*, p. 128.

identifying Barbara's predicament as reasonable grounds for divorce enables the tale to ride a wave of contemporary press interest in the power relations of marriage. Craik spells it out: Barbara's fragile existence, in which she is neither wife or mother, teacher or spinster, could only be perpetuated by a madman. 'The Double House' does not present a superficial, educative tale of monomania and Craik does little to expand on the mysterious symptoms which ultimately prove to be fatal. Rather this is a figurative version of the disorder: a domestic tyranny which Craik fashions for her spinster readership, such that they might satisfy themselves that marriage might not be all it is sometimes claimed, for 'Marriage ought always to be a question not of necessity, but choice'.²⁹ Even the more favourable marriage of the Rivers is an endless round of mis-communication and admonishment from the Doctor to his overly forthright wife. It is only the friendship Peggy and Barbara forge which strikes the one optimistic note of the story, echoing Craik's polemical position in *A Woman's Thoughts About Women* in which women of all classes are united by their self-dependence and self-determination. But although the direct speech of dialogue is mainly between the two women, we have limited access to the husbands' perspective.

Craik's story is, however, chastened by its reverence for male intellectualism. The Doctors' relative narrative silence, and the gaps where their exchanges should be, frustratingly suggest a higher order of knowledge to which the women are neither privy, nor capable of fully understanding if they were. Here the complex clinical explanation for Merchiston's 'evil' affords him the excuse of behaving in a villainous fashion whilst simultaneously being immune from outright moral condemnation. As I have argued, the reader is invited to believe that his violent animosity towards his wife is 'other'; a fact too unpalatable to form part of his own 'self'. We are to accept this version rather like Mrs Rivers' unquestioning, mutely listening grandchildren. However, the disquieting undercurrent, that marriage is both the cause and occasion of Merchiston's mental breakdown and fractured self is barely concealed. This in turn means that his 'monomania' might just depend upon the text's own unspoken and repressed antipathy towards marriage, leaving the story strangely ambivalent.

In the following chapter I discuss George Eliot's use of monomania to show how the limits of consciousness restrict any capacity for self-regulation. The contrast with Craik is marked. Some sense of their difference as writers is spelt out by Craik herself in a rather picky, anonymous review of *The Mill on the Floss*, 'To Novelists and A Novelist,' which appeared in *Macmillan's Magazine* in April 1861. Initially, full of rhapsodic praise for Eliot's 'diction [which] magnificently rolls on ... that noble Saxon English – terse and clear, yet infinitely harmonious,

²⁹ *A Woman's Thoughts About Women*, p. 131.

keeping in its most simple common-place flow a certain majesty and solemnity which reminds one involuntarily of the deep waters of the Floss'; Craik was altogether less forgiving about what she regarded as the text's implicitly dubious moral message.³⁰ With John Milton's line, 'To justify the ways of God to men', ominously hanging over her review as an epigraph, Craik finds only 'Tom Tulliver blameless because he alone exerts 'self-control', whilst Maggie is 'unsatisfying' because we do not witness the full regulation and orderly management of her passions, nor do we see an appropriate atonement for her 'faults'. In short, the novel whilst, she concedes, exquisitely penned, lacks a structure to satisfy Craik; the Flood at the end, which if meant to be redemptive, 'ought to have been worked out so plainly that no reader could mistake it' and is thus troublesome. Overall the story is morally confusing, and most shaming of all, is unfortunate in its 'involuntary blasphemy' of omitting a lesson 'to justify the ways of God to men'.³¹ We do not have any recorded reaction by Eliot to this review but Showalter notes that when a French critic in 1860 compared the two writers, she complained to a friend that, 'the most ignorant journalist in England would hardly think of calling me a rival of Miss Mulock – a writer who is read only by novel-readers, pure and simple, never by people of high culture. A very excellent woman she is, I believe, but we belong to an entirely different order of writers'.³² Arguably Eliot's high-handed dismissal is borne out by her own canonical status and Craik's demise into relative obscurity. However Showalter's suggestion that Eliot may have crafted the bitter relationship of Phillip Wakem and Tom Tulliver in *The Mill on the Floss* to repudiate Craik's sentimental portraits of John Halifax and the crippled narrating on-looker, Phineas Fletcher, in her best-selling foundling narrative *John Halifax, Gentleman* (1856), is persuasive.³³ So in historicising monomania's literary context, and most especially the context of the literary marketplace, Craik's prodigious shifting of novels and copy, alongside her anti-intellectual moral didacticism, offers an almost perfectly antithetical counterbalance to Eliot's refusal of the marriage plot and more intricate 'high' culture.

³⁰ Dinah Craik, 'To Novelists – and a Novelist', *Macmillan's* (April 1861) p. 443.

³¹ Dinah Craik, 'To Novelists', p. 444.

³² *The George Eliot Letters*, ed. Gordon Haight (New Haven: Yale University Press, 1954) III, p. 302.

³³ Showalter, p. 18.

Chapter Six: Monomania as a (mis)representation of passion: George Eliot's *The Mill on the Floss* (1860)

*He thought it was becoming a sort of monomania with him, to want that long look from Maggie; and he was racking his invention continually to find out some means by which he could have it...*¹

In his July 1869 journal George Henry Lewes records reading Jean Etienne Esquirol's *Des Maladies Mentales* (1838) around the time he was caring for his ailing son, Thornton, and while George Eliot was starting work on *Middlemarch* (1871-2).² Thornie's requests for increasingly large doses of morphine to bear the agonising pain of (what they later discovered was) spinal tuberculosis had prompted Lewes to speak to him about what he called an 'effort at self-control' in keeping to a strict regime of dosage.³ Primarily this reveals an obvious parental concern that Thornie should avoid dependence and become resistant to the drug's relief, but incidentally Lewes's journal also shows that he was also interested in the effects of pain relief on the nerves as part of his wider drive to understand physiology for *Problems of Life and Mind* (1874-79), his ongoing project. That the body might triumph over the psyche in the form of a slavish addiction was therefore an agonising personal domestic anxiety with a bitter intellectual resonance. In this chapter I will argue that this question of whether the moral conscience can exert control over the unconscious impulse, also informs George Eliot's literary use of the concept of monomania. Offered as a rhetorical 'diagnosis' to jolt the 'patient' into conscious awareness of a passion that has become akin to addiction, the word is used both warningly and pejoratively. Similar to Brontë's use of the idea in *Villette*, it eschews the sensational, and works to simultaneously identify and restrain immoderate feeling.

Significantly, Lewes's other choice of reading material for that month, Henry Maudsley's staunchly materialist *The Physiology and Pathology of Mind* (1867), will have jarred with Esquirol's predominantly metaphysical, imprecise and increasingly outmoded framing of mental disease which did not, for example, take account of the 1837 discovery of the spinal

¹ George Eliot, *The Mill on the Floss*, ed. by Gordon S. Haight with an Introduction and Notes by Juliette Atkinson (Oxford: Oxford University Press, 2015), p. 375. Future page references are to this edition, and are included in parentheses in the text.

² Michelle Eisenberg, 'George Henry Lewes's 1869 Diary and Journal: A Transcription and Annotation of Unpublished Holographs Held at the Beineke Library of Yale University' in *George Eliot - George Henry Lewes Studies*, 67: 2 (2015), 93-226 <http://www.jstor.org/stable/10.5325/georelioghstud.67.2.0093> Accessed: 09-01-2017

³ Ibid. p. 156.

cord's significance for the nervous system or the reflex action. If illustration were needed that faculty psychology was gradually giving way to physiological psychology the contrast between these two books could not have been more apt. Monomania, which had been fashioned by Esquirol as a disease of one excessive passion to provide distinction from the old-fashioned humoral melancholy, had by the 1860s almost imperceptibly metamorphosed into a comprehensive morbid taint. In *Physiology and Pathology* Maudsley radically revised its definition as follows:

In vain do men pretend that the mind of the monomaniac is sound, apart from his delusion: not only is the diseased idea a part of the mind, and the mind, therefore, no more sound than the body is sound when a man has a serious disease of some vital organ, but the exquisitely delicate and complex mechanism of mental action is radically deranged: the morbid idea could not else have been engendered and persist. The mind is not unsound upon one point, but an unsound mind expresses itself in a particular morbid action.⁴

Partial therefore only in expression, monomania in the 1860s briefly became a disease of the entire brain organ. Such plasticity of definition ensured its persistence until Maudsley chose to omit the idea altogether from the 1895 revised edition, now re-named to emphasise his increasingly accepted specialism, *The Pathology of Mind*.

Besides their voracious scientific reading which they shared and discussed, and before Lewes' specific reading of Esquirol, he and George Eliot will have already been alert to the idea of monomania via popular discourse. They had both read Honoré de Balzac's story of an old man's avarice symbolised by his 'monomania for gold', *Eugénie Grandet* (1833).⁵ George Eliot had a copy of Anthony Trollope's extended study of a monomaniacal husband, *He Knew He Was Right* (1869), in her home library.⁶ She claimed that but for Trollope she would not have been able to finish *Middlemarch*.⁷ References to it can also be found in her letters. Writing to the Brays from Geneva in 1849, she mentions her neighbour and good friend Mrs Abijah Hill Pears, asking 'How does she manage to endure life with that poor monomaniac husband?'⁸ Her meaning is flippant, akin to the modern word 'obsessed' and may refer to one

⁴ Henry Maudsley, *The Physiology and Pathology of Mind* (London: Appleton & Company, 1867) p. 326.

⁵ 'Belles Lettres and Art' in *Westminster Review*, 66 (July, 1856) 262. In a column attributed to George Eliot, reviewing the novel *Beyminstre*, she wrote '...it belongs to that genus of novels in which Miss Austen and Balzac have given us too high a standard to allow of our being easily satisfied'.

⁶ William Baker, *Libraries of George Eliot and George Henry Lewes* (Victoria: University of Victoria, 1981).

⁷ John Sutherland, Introduction to Anthony Trollope, *He Knew He Was Right* (Oxford: Oxford University Press, 2008). Sutherland draws attention to the similarity between Priscilla Stanbury's observation that 'Every one to himself is the centre and pivot of all the world' and Dorothea Brooke's 'emergence' from 'moral stupidity, taking the world as an udder to feed our supreme selves'. See footnote 153.

⁸ *The George Eliot Letters*, ed. by Gordon S. Haight (Oxford: Oxford University Press, 1954), I (1836-1851), p. 318.

or all of Pears's major preoccupations: liberal politics, his work as Coventry's mayor or his commercial venture as a ribbon-manufacturer.⁹ Nancy Henry has also drawn attention to Eliot's revulsion at gambling and her consequent description (in a letter to Mrs William Cross in 1872) of the roulette table in a hotel in the German spa town of Homberg around which 'hideous women [were] staring at the board like stupid monomaniacs'.¹⁰

These light, popular allusions aside, Gillian Beer's observation with regard to Eliot's use of the Darwinian words 'variation' and 'dynamic' in *Middlemarch*, wherein she was 'weighting her words with the fullest concerns of the time', is cautionary and pertinent.¹¹ George Eliot's engagement with organicist and evolutionary theory, which has occupied scholarship for some time, would suggest that she, like Lewes, considered mental abnormalities to be partly caused by ancestral abnormalities, alongside cerebral disease and sociological factors.¹² In other words, to read George Eliot's reference to this psychopathology in her novels as innocently popular or unimportant, is to dismiss the contexts of her thinking on heredity, consciousness and moral conscience which so frequently inform her work. What might seem superficial is actually intricately placed.

A parallel example of this occurs with regard to her use of the term 'double consciousness' in *The Lifted Veil* (1859), which she wrote as an interruption to her work on *The Mill on the Floss*. The near-omniscient first person narrator Latimer is briefly hopeful that his old friend and physician Charles Mennier might be able to offer a scientific remedy for his own 'abnormal mental condition' in which he can involuntarily hear the thoughts of others like 'the loud activity of an imprisoned insect'.¹³ This 'superadded consciousness' fuels Latimer's misanthropy as he 'overhears' the pitying, or even appalled, regard in which he is held by his family and other incidental characters. His madness in *The Lifted Veil* highlights the problems of hypersensitivity and moral wakefulness. Being so aware of his impact on others proves horribly counter-productive. It is only the isolated and blissful ignorance of his wife Bertha's consciousness which ensures her mystery, and hence her allure. On occasion Latimer refers to his condition as a 'double consciousness', a quasi-technical term promoted

⁹ 'Obsessed' is a word that google n-grams show in use from 1900, arguably replacing 'monomania' in popular discourse.

¹⁰ Nancy Henry, *The Life of George Eliot: A Critical Biography* (London: Blackwell, 2012) p. 207.

¹¹ Gillian Beer, *Darwin's Plots: Evolutionary Narrative in Darwin, George Eliot and Nineteenth-Century Fiction* (1983: Cambridge: Cambridge University Press, 3rd ed. 2009) p. 140.

¹² For other critics who discuss extensively the importance of science and psychology in George Eliot's work see Michael Davis, *George Eliot and Nineteenth-Century Psychology: Exploring the Unmapped Country* (2006); Angelique Richardson, *After Darwin: Animals, Emotions and the Mind* (2013); Rick Rylance, *Victorian Psychology and British Culture 1850-1880* (2000), Sally Shuttleworth, *George Eliot and Nineteenth-Century Science* (1984); Delia da Sousa Correa, *George Eliot, Music and Victorian Culture* (2003). I discuss Lewes' particular view on mental abnormality later in this chapter.

¹³ George Eliot, *The Lifted Veil and Brother Jacob*, ed. by Helen Small (Oxford: Oxford University Press, 1999), p. 13.

particularly by George Eliot's friend and sometime doctor, Sir Henry Holland (1788-1873). Eliot co-opted this term to refer to herself, framing it (according to Herbert Spencer) as 'a current of self-criticism being an habitual accompaniment of anything she was saying or doing; and this naturally tended towards self-depreciation and self-distrust'.¹⁴ Her interest in such distortions and even abnormalities of consciousness, resurfaces in her fiction not as a problem of medical pathology but as one of moral philosophy: how to balance consciousness of others with consciousness of one's self.

In the spring of 1870, following Thornie's death, Lewes and George Eliot spent a period recuperating in Berlin, during which time Lewes visited a number of hospitals, including Dr. Westphal's psychiatric hospital where he saw a range of mentally diseased patients. This was a branch of medicine which George Eliot said she found 'hideous'.¹⁵ Nonetheless, she is likely to have shared Lewes's emerging view on mental aberrance which he set out in detail in the posthumously published first volume of the third series of *Problems of Life and Mind* (1879), the last two volumes of which George Eliot edited herself. This view drew a sharp distinction between spiritualist understandings of mental maladies clouded by 'the mists of metaphysics' and the theories of the organicists. By way of illustration, Lewes bemoaned the theory of the supposed 'supreme authority' on mental disease, German physician Johann Heinroth. In *Störungen des Seelenlebens* (1818) (*Disturbances of the Soul's Life*) Heinroth argued that the soul had primacy over the body and that sin (a consequence of the *Fleisch* and man's basic drives) caused mental illness. Writing about this 'religious' and outmoded concept of insanity Lewes observed:

[...] [Heinroth] declared that all mental abnormalities were to do with irregularities of Reason, the instigations of Passion. Insanity thus became the symptom of Vice. 'Innocence is never insane, only guilt'. The practical absurdity of this theory has long been recognised. No one now argues with a demented patient. No one thinks of curing mania with sermons. The existence of a cerebral disease, which demands the physician's care is now the universal belief. Mental maladies have taken their place beside bodily maladies, and have become a subject of natural science, to be studied on the same method as all other sciences.¹⁶

But Lewes went on to complicate this organicist position in some measure, by concurring with the 'latest writer on the subject', Heinrich Schüle (1840-1916), who worked at Germany's most progressive asylum, Illenau. In *Problems* Lewes cites Schüle as being the closest to his own

¹⁴ See Helen Small's footnote 21, p.94-5 to George Eliot, *The Lifted Veil* in which she cites this remark from Herbert Spencer's *Autobiography*.

¹⁵ Gordon S. Haight, *George Eliot: A Biography* (Oxford: Oxford University Press, 1968) p. 424.

¹⁶ George Henry Lewes, *Problems of Life and Mind: Third Series. Problem the First: The Study of Psychology: Its Object, Scope and Method* (London: Trübner & Co., 1879) pp. 35-37.

position on insanity, and most particularly when Schüle insists that mental maladies are cerebral diseases, but that they are ‘more’ than this. Lewes offered this explanation:

The *more* consists in conceiving the patient, not simply as one suffering from cerebral disease, but as a spiritual being, the product of former generations, so that his ancestors must be taken into account among the conditions of his psychical symptoms. This recognition of the individual as a product of his race, and consequently of individual abnormalities as determined by ancestral abnormalities, is a true biological standpoint; and only needs to be completed by the sociological standpoint which regards the individual mind as determined by the General Mind.¹⁷

Eliot will then, at the least, have been aware of Lewes’ view on insanity, that its causes were threefold: organic, ‘ancestral’ (as opposed to purely simply biologically ‘hereditary’) and ‘sociological’ or determined by the ‘General Mind’. This is especially relevant to George Eliot’s depiction of community in *The Mill* and the ‘narrow oppressiveness’ in which Maggie and Tom grow up.

Alongside Lewes’ influence, George Eliot’s own neglected translation of Baruch Spinoza’s *Ethics*, to which Isobel Armstrong has drawn attention, is relevant to an understanding of her representation of pathologized passion.¹⁸ Armstrong argues that Spinoza’s insistence that one might overcome bondage to the passions through rational understanding, or put another way, that conscious awareness of a passion might allow one to control it, is key to an understanding of Eliot. Rejecting a Cartesian duality of mind and body, Spinoza posited a corporeal consciousness such that consciousness only works because of affects: ‘The arousal of imagination is continuous with the body, and reacts with it. It is a bodily form of knowledge, the consequence... of the passing into consciousness of sense stimuli. To imagine an affect is to have it and to have it is to imagine it.’¹⁹ In this way the self’s ‘supreme hubris’ is to imagine an unshackled free will which denies the body. George Eliot’s frequent use of the word ‘consciousness’ (which as Jill Matus has noted, re-occurs forty-four times in *The Mill*) is relevant here, and to complicate matters is bound to broader questions of agency, consciousness about consciousness and also about unconsciousness.²⁰ More straightforwardly, ‘monomania’ in George Eliot’s narratives is, I argue, to do with an acute consciousness of passion. Using a Heinrothian discourse of guilt (in which ‘insanity’ is always

¹⁷ Lewes, p. 37.

¹⁸ Isobel Armstrong, ‘George Eliot, Spinoza and the Emotions’ in *A Companion to George Eliot*, ed. by Amanda Anderson and Harry E. Shaw (Chichester: Wiley Blackwell, 2013), pp. 294–308.

¹⁹ Armstrong, p. 300.

²⁰ Jill L. Matus, ‘George Eliot and the Sciences of the Mind: The Silence that Lies on the Other Side of Roar’ in *A Companion to George Eliot*, ed. Amanda Anderson and Harry E. Shaw (Chichester: Wiley Blackwell, 2013) p. 462.

sinful) Eliot's characters attempt to misrepresent passion in order to test its veracity or to discipline it. However this effort always fails.

In addition to monomania's use as a disciplinary discourse, I will also argue that in her representation of Maggie's all-consuming passionate sensibility, 'which expels every other form of consciousness,' George Eliot tries out the idea that her heroine has inherited this tendency from her unstable, morosely inclined father (27). In her novels, Eliot uses the idea of monomania explicitly: twice in *The Mill on the Floss* (1860), firstly as a pseudo-intervention by surrogate doctor Philip Wakem upon Maggie Tulliver when she channels her passionate sensibility into an asceticism inspired by Thomas à Kempis's devotional text *The Imitation of Christ* (ca. 1418-1427), and secondly in an apparently facile self-diagnosis by Stephen Guest. In *Daniel Deronda* (1876) the word 'monomaniac' is used twice, in both instances to consider the impression that the visionary Mordecai makes upon Deronda.

Maggie Tulliver's dilemmas most especially engage with William Carpenter's theory of 'unconscious cerebration', the idea that emotional reactions occur outside of conscious thought until attention is drawn to them: 'Our feelings towards persons and objects may undergo most important changes, without our being in the least degree aware, until we have our attention directed to our own mental state of the alteration which has taken place in them'.²¹ And in one remove from Carpenter's theory (but closer in spirit to Spinoza), in the course of the novel we also see the thwarting of her will by these unconscious forces. The novel is steeped in this physiological psychology in which monomania anachronistically sits.²² As Pauline Nestor notes of George Eliot's reading: 'All of the pioneering psycho-physiologists – [Alexander] Bain, Carpenter, [Thomas] Huxley, Spencer, Lewes- challenged the existence of the free will and, under the guise variously of 'ideo-motor' or 'secondarily automatic' action, 'automatism' and 'unconscious cerebration', proposed permutations on a theory of reflex as the foundation of action'.²³ Nestor argues that *The Mill on the Floss* 'is charged with a sense of the forces which undermine the sovereignty of the will. It is a work haunted by violence and madness – real, incipient or feared – in which forms of vacancy,

²¹ Taken from William Benjamin Carpenter, 'The Power of the Will over Mental Action' in *Principles of Mental Physiology* (1874), 2nd edn. (London: Henry S. King, 1875) which was an expanded version of *Human Physiology* (1852 and 1855) and is cited in *Embodied Selves: An Anthology of Psychological Texts 1830-1890*, ed. by Jenny Bourne Taylor and Sally Shuttleworth (Oxford: Oxford University Press, 1998) p. 100.

²² George Eliot was familiar with William Carpenter's *Principles of Human and Comparative Physiology* (1842) and Herbert Spencer's *Principles/History of Psychology* (1855); George Lewes published *The Physiology of Common Life* (1859) as she wrote *The Mill on the Floss* and famously she was, initially at least, coolly receptive to Charles Darwin's *The Origin of Species* (1859).

²³ Pauline Nestor, 'The science of the mind' in *George Eliot in Context* ed. Margaret Harris (Cambridge: Cambridge University Press, 2013), p. 268.

amnesia and unconsciousness repeatedly thwart intention, and the pervasive metaphors of the twin tides of the river and music conjure the disruptive forces of destruction and desire'.²⁴

Set back about a generation earlier than its publication, *The Mill on the Floss* covers the period of Eliot's own youth, from 1829 onwards. In one sense, George Eliot uses monomania as part of its carefully rendered period detail. However at the same time it also sits within the novel's keen engagement with physiological science. In the 1830s, monomania still endured partly as Esquirol had originally set out, as a 'disease of the sensibility... inseparable from a knowledge of the passions,' yet to be overrun by the legal and overtly derisory associations arising from its use as an insanity defence.²⁵ Accordingly Maggie Tulliver's passions are deemed singular and excessive. Driven by these uncontrollable forces which leave her at variance with her circumstances, her early death in a watery grave is foreshadowed by Mrs Tulliver's warning that Maggie's river-side wanderings mean that 'she'll tumble in some day' (12). This might look back to Ophelia and 'The Lady of Shalott' (1832); a literary tradition of lovelorn women irreversibly ostracised for their assertion of feeling amidst cultures of rigid restraint. The river becomes a current of sexual desire and passion. Indeed, in the course of the novel Maggie's passions are not only evaluated harshly by others, but also sometimes seen as a danger to her mind; as a girl she exasperates her Mother and Aunts but gradually this sense of difference takes on a tragic hue. Her feelings threaten to become no longer an expression of character, but perhaps part of an inherited trait from her alternately morose and raging father, or an illness brought on by her over-reaching, unfeminine pursuit of bookish knowledge. Mrs Tulliver alerts us early on to Maggie's tendency to impulse and distraction, but insists there is no taint of insanity in *her* family: 'I'm sure the child's half a idiot i' some things [...] she [...] 'ull sit down on the floor I' the sunshine an' plait her hair an' sing to herself like a Bedlam creatur [...] 'That niver run i' the family' (12). Similarly, when Aunt Pullet observes tartly of Aunt Glegg, that, 'Her temper's beyond everything [and may] carry her off her mind' she adds the hasty caveat that actually none of her family have ever ended up in a madhouse (92). Not yet: Maggie carried on by natural forces, 'which will make a way for themselves, often in a shattering, violent manner' may be the first.²⁶ Seeking out a private space where she might give vent to her 'ill-humours', in the attic she sobs 'with a passion that expelled every other form of consciousness,' violently hammering nails into the head of her Fetish, sometimes supposed to be the particularly oppressive Aunt Glegg (27). But the text insists she

²⁴ Nestor, p. 268.

²⁵ E. Esquirol, *Mental Maladies: A Treatise on Insanity* (1838), trans. by E. K. Hunt (Philadelphia: Lea and Blanchard, 1845), p. 200.

²⁶ This passage appears in Eliot's manuscript but is deleted from the proof of the first edition. Current editions vary as to whether they include the passage in the main body of the novel text. An edition that does so is that edited by A. S. Byatt for Penguin Classics (Harmondsworth, 1979) p. 320.

is natural; her Aunts are artfully contrived in their shows of emotion demonstrated by their tragi-comic adherence to propriety. Eliot's satirical observations on 'the complexity introduced into the emotions by a high state of civilisation' are realised in the Dodson sisters' detailed understanding of hat-fashions, absurd enthusiasm for funerals and manufactured grief (53). Therefore the clear juxtaposition of Maggie's spontaneity and her Aunts' contrivance frames any suggestion of madness or abnormality as a slight voiced by the Dodson clan against the poor stock of the Tullivers. By contrast the narrator's commentary on Maggie's consciousness focuses more acutely her animal impulsivity and ambivalence towards the 'oppressive narrowness' of St.Ogg's culture.

Hungry to escape penury's perpetual round of sameness in which her parents' 'uncultured minds' threaten to become like 'machines set to a recurrent set of movements' Maggie is eager not just for pleasure, but also for an explanation of her lot (259). Intermittently angry and pitying towards her father's paralysing depression and her mother's 'mental feebleness' she readily takes on blame and guilt (256). Escape is only likely to arrive in fairy-tale form. Bob Jakin's present of Thomas à Kempis's *The Imitation of Christ* thus appears charm-like and apparently offers a transformative experience as an awe-filled Maggie reads its wise counsel against egoism, albeit to the point of self-abnegation. Eliot re-read it in advance of her writing and according to Gordon Haight drew on the text in times of personal trial throughout her early life, buying a new edition with woodcuts around the time of her father's death in 1849.²⁷ In *The Mill on the Floss* an uncanny 'hand' which has previously pencil-marked passages guides Maggie toward an apparent epiphany. But Maggie's beliefs take on an 'exaggerated', excessive form. Eliot's intrusive narration characterises this as an inevitable part of her nature:

From what you know of her, you will not be surprised that she threw some exaggeration and wilfulness, some pride and impetuosity even into her self-renunciation: her own life was still a drama for her, in which she demanded of herself that her part should be played with intensity. And so it came to pass that she often lost the spirit of humility by being excessive in the outward act ... For example, she not only determined to work at plain sewing that she might contribute something towards the fund in the tin box, but she went in the first instance in her zeal of self-mortification to ask for it at a linen-shop in St.Ogg's, instead of getting it in a more quiet and indirect way' (271).

This passage sets up Philip Wakem's later accusation of monomania: her 'intensity' and 'zeal' characterising her pious faith as paradoxically brazen and blind to the social embarrassment her trip to the linen-shop might cause to Tom's punishing sense of pride. Her 'plain sewing' becomes part of an asceticism which is an overly forceful show of humility. However Eliot is

²⁷ Gordon Haight, *George Eliot: A Biography*, (Oxford: Oxford University Press, 1968) p. 66.

also at pains to defend such religious ‘enthusiasm’, which she favourably compares to the more sensual ‘*ekstasis*’ (rapture) of the moneyed classes (271). Indeed whilst not suited to a ‘quiet’ show of faith, in seeking remuneration for her work Maggie is doing so by necessity and is characterised apart from Lucy who does frivolous, fancy sewing, and all the while is destined for a propitious marriage.

Nestor argues that the mid-Victorian novel connects the process of reading and keeping one’s conscience awake: there is often a marked correlation between reading and self-awareness.²⁸ As a child Maggie shows her first understanding of the high price extracted for female deviance through her explanation of the story of the witch in Daniel Defoe’s *History of the Devil* which she rehearses to the aghast and condescending Mr Riley. Dark-haired and defiant, she also identifies with the tragic heroine of Germaine de Staël’s *Corinne* (1807) whose lover abandons her for her fair-haired half-sister Lucille: ‘I’m determined to read no more books where the blond-haired women carry away all the happiness... If you could give me some story, now, where the dark woman triumphs, it would restore the balance’ (308). This desire to ‘avenge’ on behalf of ‘all the dark women’, gives her the status of what Royce Mahawatte argues is ‘a meta-Victorian heroine in form’ in which her link to the ‘real’ world of the novel is inflected by her own astute understanding of literary genre. Here she exists more comfortably for, ‘...the world outside the books was not a happy one’ (219). I would also argue that it characterises her, like Latimer in *The Lifted Veil*, as inordinately perspicacious and detrimentally self-aware.²⁹

It is Philip Wakem who prefigures that Maggie will up-end such conventions by stealing a handsome young man away from her cousin Lucy, which Maggie regards as an ‘odious’ affront. Nonetheless when he suggests that she may then make an unconventional choice of lover (alluding clearly to himself) she sidesteps the question. This is part of the novel’s self-consciousness: Maggie could of course easily have been written as a bold, brunette, avenging heroine who upsets both social and economic convention. To disrupt the marriage of Mr. Deane’s daughter, Lucy, to Mr. Guest’s son, Stephen, and thus disrupt the most important business partnership in St.Ogg’s has all the hallmarks of a compelling Austen plot and until her decision at the Mudport inn not to marry Stephen, this is how matters proceed. But just as Maggie is intertextually linked to images of the literary heroine, she simultaneously defies their restricting pattern. Symbolically Eliot has her heroine hack away at her hair, implicitly rejecting the literary convention of blonde Protestant domesticity or

²⁸ Nestor, p. 267.

²⁹ See Royce Mahawatte, *George Eliot and the Gothic Novel: Genres, Gender, Feeling* (Cardiff: University of Wales Press, 2013), p. 100. Mahawatte argues that *The Mill on the Floss* is a proto-post-modern Gothic romance.

daringly flaunted brunette femininity. Maggie's hair only grows back in Medusa-like snakes.³⁰ She also opts for duty over passion, not because she is a 'monomaniac' but because a reunion with her brother Tom proves to be her overwhelming passion.

Simplistic dualistic constructions of literary femininity were a particular complaint of Eliot's. It was a theme she had taken up previously in her essay 'Silly Novels by Lady Novelists' (1856) in which she was scathing in her attack on the 'mind-and-millinery' and Evangelical novels of the day.³¹ Heroines who were at once blindingly beautiful, possessed of remarkable intellects and idyllically satisfied by auspicious marriages did nothing to highlight, for example, the paucity of educational opportunities for women. Wider popular dissatisfaction with the whole business of novels and their perusal was, of course, by no means new and had been aired in the periodical press for well over a decade. Quite apart from any distorted depiction of the realities of women's lot, there was also the more pressing matter of their emotional expectations. Women's magazines had urged caution: in 1842 *The Ladies Cabinet of Fashion, Music and Romance*, for example, opined on the practice of novel reading by delicate girls with 'susceptible hearts'.³² With love as the novel's principal subject these narratives tempted with a dangerous allure. Accordingly the *Ladies Cabinet* lamented that: 'There is always one hero, on whom the heroine fixes her inclination. The girl who is conversant with this species of composition, will expect to find such a hero in the world: the first man who pays her any particular attention will soon make an impression upon her already prepared heart'.³³ Whilst Eliot's objections confronted the 'silliness' of these novels and the potential of the novel to do so much more by way of showing 'experiments' in life, the *Ladies Cabinet* concerned itself with the impressionable girls who made up the readership of romance novels. Eliot's own solution to this was to include Maggie's example. Using Maggie's expressed opinions on *Corinne* and other heroines, as well as her own narrative arc, the readers' feelings are trained into a disavowal of simplistic literary solutions to lovesickness or hopelessness. Philip Wakem's self-interested prescription of a fuller exposure to the medicine of culture in the form of books about the love-sick, to educate and manage the severity of Maggie's passionate disposition, is therefore exposed as highly questionable. Although Philip associates Maggie with the image of a 'tenth muse' inspiring his own lovelorn pictures of her, Maggie refuses such idealised narratives, never reaches the end of these books and is, in a sense, abruptly written out of her own story.

³⁰ Nina Auerbach, 'The Power of Hunger: Demonism and Maggie Tulliver', *Nineteenth-Century Fiction*, 30:2 (September 1975), 150-171. Auerbach argues that Maggie's hair is 'demonic' and part of the novel's Gothic bent.

³¹ George Eliot, 'Silly Novels by Lady Novelists,' *Westminster Review*, 66 (Oct. 1856), 442-61.

³² Anon., 'Novel Reading', *Ladies' Cabinet of Fashion, Music and Romance*, January, 1842, pp. 60-61.

³³ Ibid.

With the ‘trembling’ realisation that Philip has inadvertently confessed his love, it is Maggie’s refusal of his suit, albeit tenderly delivered, which prompts his angry diagnosis of monomania. Acting as a surrogate-doctor, his attempt to dissuade her against her vigilant asceticism and ‘self-renunciation’ based on her reading of Thomas à Kempis, with its dutiful homage to the ‘past’ and to the will of her Mother and Father, is also an attempt to maintain his own threatened access to Maggie. He describes her two year self-imposed experiment in self-effacement and dull resignation as ‘a narrow self-delusive fanaticism’ and a ‘long suicide’ (305). His final accusation that this self-sacrifice and self-negation is a ‘monomania’ is delivered ‘impatiently’:

‘No, Maggie, you have wrong ideas of self-conquest, as I’ve often told you. What you call self-conquest – blinding and deafening yourself to all but one train of impressions, is only the culture of monomania in a nature like yours’ (311).

In one way he articulates the reader’s frustration with Maggie’s negation of her own power; her monomaniacal reading of à Kempis denies us the satisfying narrative arc of a *Bildungsroman*. She is effectively at a standstill, paradoxically fixated on the one idea of feeling nothing at all. Structurally this sets up the juxtaposed, on-coming tidal wave of complicated feeling Maggie (and the reader) is about to experience when she endures the religiously fashioned ‘Great Temptation’ of Stephen Guest.

We also know that Philip Wakem lacks agency. Whilst Eliot is careful to establish that his disability does not confer any particular virtue upon him, Maggie still pities him. Any suggestion of sexual attraction is absent; he is a version of the ‘dear, good brother’ whom the tall and beautiful Maggie and Eliot both mourn, a conduit for Maggie’s temporary access to literary culture, described as ‘by nature half feminine in sensitiveness’ (307). Garrett Stewart argues that he is ‘an emblem of our own novelistic experience’ of Maggie. His access to her emotions and motives, which he later spells out in his letter to her, are coloured by his passivity, romantic intellect and unreciprocated passion. As surely as he reads her destiny, he possesses a reader’s distance from any likely impact on the course of the plot: ‘[his] selfless adoration of Maggie is the price he pays for knowing her as he might a Nobody, a fictional heroine’.³⁴

Ironically it is only a moment of true self-sacrifice that allows Maggie to respond to Philip with words that are both ‘sincere and deceptive’: she tells him that she loves him and kisses him out of pity. Given Philip’s role as a proxy-narrator who

³⁴ Garrett Stewart, ‘Reading Feeling and the “Transferred Life”: *The Mill on the Floss* in *The Feeling of Reading: Affective Experience and Victorian Literature* ed. by Rachel Ablow (University of Michigan Press, 2010), p. 193.

imagines Maggie's fate from within the text, his direct speech here is delivered with a sympathetic apprehension of her 'nature' which is akin to omniscience. His diagnosis is clear, but for a 'nature' vulnerable to such religious fervour the traditional prognosis would be a further monomania fixed on 'love'. His use of the word, with its connotations of psychiatric modernity, draws a line under her obsolete religious ideas and by the next chapter Tom is pleased that she is 'less odd and ascetic' (313). So whilst at the same time offering an inversion of the diagnostic category wherein it becomes one of emotional chastening and suppression, a strategy to promote what William Carpenter called a 'developed reflex', Eliot also implicitly valorises 'unconscious' feeling. The negation which 'a culture of monomania' promotes, with its denial of joy and spectrum of the permissible, particularly in one given to the 'volcanic upheavings of imprisoned passions', suggests that both religious and cultural prescriptions are both utterly unworkable 'cures' for Maggie: she is what she is.

Stephen Guest's self-diagnosis is recorded by the narrator as a realisation which occurs during a taut drawing-room scene:

He thought it was becoming a sort of monomania with him, to want that long look from Maggie; and he was racking his invention continually to find out some means by which he could have it (375).

An apparently accidental, but actually carefully engineered, 'invented' encounter by Stephen, the action is underpinned by a tension between involuntary sexual attraction and its conscious acknowledgement. With her 'strange eyes' acting like a contagion, Maggie Tulliver's arresting presence affects the rich, provincial dandy so that, as we are given access to his consciousness, we understand that he evaluates his urgent desire as an irresistible but unnatural excess; as he facetiously puts it, as 'a sort of monomania'. What he particularly craves is her gaze ('I wish she would look at me again'; 'She doesn't look at me when I talk of myself [...] I must try other subjects') and it is the persistence of this idea in his thoughts which, he reflects, is becoming monomaniacal. A little later in the novel's sequence of events, at the Park House dance, the narrator seems to confirm Stephen's own assessment of himself as he has 'an inward vision of [Maggie] which perpetually made part of his consciousness' (407).

Leisured and 'odoriferous', there is a whiff of vanity about Stephen whose longing to be admired by Maggie underscores his unflinching egoism. As Gordon Haight spelt out in his Introduction to the novel, he is a better selection than Phillip Wakem of the species; his imposing, manly exterior, deep bass voice and polished courtesies are part of a peacock

display which registers contrastingly as virile and potent.³⁵ And his charms are not just physical. His mooted marriage to Lucy Deane would augment the business partnership of their fathers and place him firmly as heir to the upward fortunes of the oil-mill and St.Ogg's wharf. But for Stephen, his attraction to the beautiful but 'semi-pagan' Maggie is economically backward and, unlike his affection for Lucy, unhelpfully 'maddening'. Associated, via rowing, with the movement of the river and the accelerated, 'unconscious' passage of time and inevitable progress, his seductive presence suggests the tempting 'inclination of the moment' (440).³⁶ However it is his intense search for Maggie's eyes and his conscious awareness of it which help to ensure that he is more than a just foppish charmer. Whilst Royce Mahawatte suggests that Stephen's use of the word 'monomania' to describe his passion associates him with 'a rakish male from a sensation novel', Eliot's representation of his inner monologue wherein he sits perilously close to Maggie stroking the dog's head 'like some action in a dream' (375), suggests that he is actually engaged in a brief moment of self-criticism, rousing himself from a semi-conscious, drowsy pursuit of her.³⁷

According to a reflective Dr. Kenn, Maggie's gaze is 'honest' (403). More complicated than a 'melancholy chimp' but without the affected emotions of civilisation, spontaneous, genuine Maggie meanwhile, is only conscious of Stephen's presence as of a 'closely-hovering broad-winged bird in the darkness' (44, 375). Not quite as viciously sharp-eyed as Grandcourt whose presence in the drawing-room after a dinner party '...could be surpassed by no sleepy-eyed animal on the watch for prey', Stephen is nonetheless characterised as mercilessly self-interested.³⁸ By contrast Maggie, we know from her childhood, is ordinarily as exuberant as a domesticated farmyard animal, 'tossing her mane' or 'like a Skye terrier escaped from his bath', and as a young woman seated nervously in the drawing room she retains enough childish instinct to be aware of her vulnerable position as hunted prey. And like prey she sits, rigid and hardly daring to raise her eyes. Gauche, possessing only a patchy education to defend against Stephen's urbane charm, her own response is physiological and unreflecting. Her body articulates her feeling and complicates fluent thought. George Eliot's crafting of this scene is typically shot through with back and forth free indirect access to the thoughts of Stephen and Maggie: he, hesitant but capable of reflection, her petrified.

³⁵ Gordon S. Haight, Introduction to George Eliot, *The Mill on the Floss* (Boston: Riverside, 1961), p. xiii.

³⁶ See Sally Shuttleworth, *George Eliot and Nineteenth-Century Science: The Make-Believe of a Beginning* (Cambridge: Cambridge University Press, 1984) who argues that Eliot attributes a moral role to the unconscious in *The Mill on the Floss* (p. 75), placing her in contradiction to William Carpenter who saw the unconscious as a source of moral weakness.

³⁷ Mahawatte, p. 111.

³⁸ George Eliot, *Daniel Deronda*, ed. by Graham Handley (Oxford: Oxford University Press, 2014), p. 347.

The spontaneity of feeling which they are later to give into in a heady, eroticised boat-trip suggests that her unconscious desire is overcoming her. With a fissured or 'added self', Maggie allows herself to be seduced 'without any act of her own will' (430). There is 'an unspeakable charm in being told what to do, and having everything decided for her' and her 'acquiescence' is framed as a satisfying relief from the monotonous, 'monomaniacal' vigilance of wilful denial which has typified her recent years (431).

In a novel so concerned with the unconscious drift of human behaviour, of being determined by imperfectly comprehended forces greater than oneself, attempts at 'correcting' passion by diagnosing it as a monomania fail dismally. For Maggie emotion and sensory experience cannot be readily differentiated, they feed into each other; her 'sensibility' is also inherently 'passionate', shown for example in her response to the 'excitement of music' (371).³⁹ Michael Davis argues that both Maggie and Stephen cannot control emotion, the novel does not reproduce 'the gender essentializing stereotype' in which 'women are defined, in a major strand of the scientific and medical writing of the period, as being relatively dominated by the emotions, and by the body in general, at the expense of the intellect, while in men the opposite applies'.⁴⁰ Although this was not a monolithic view of the period it was certainly vigorously represented in scientific writings. T. H. Huxley, for example, who whilst arguing that a typically dull traditional education had magnified the difference, observed that women were nonetheless 'by nature, more excitable than men – prone to be swept away by tides of emotion, proceeding from hidden and inward, as well as obvious and external causes'.

⁴¹ And in many way this was an advance upon the traditional mid-century view articulated by John Gideon Millingen who more vividly claimed that women were:

'... less under the influence of the brain than the uterine system [...] subject to all the aberrations of love and religion; ecstatic under the impression of both, the latter becomes a resource when the excitement of the former is exhausted by disappointment, infidelity, and age – when, no longer attractive, she is left by the ebb of fond emotions on the bleak shore of despondency [...] her passions, when no longer trammelled by conventional propriety, burst forth in unquenchable violence. Insanity frequently offers a sad proof of this fact'.⁴²

³⁹ See Delia da Sousa Correa, 'The Mill on the Floss: 'A Mind Susceptible to Music' in *George Eliot, Music and Victorian Culture* (Basingstoke: Palgrave MacMillan, 2003).

⁴⁰ Michael Davis, *George Eliot and Nineteenth-Century Psychology: Exploring the Unmapped Country* (Aldershot: Ashgate, 2006), p. 99.

⁴¹ From T. H. Huxley, 'Emancipation: Black and White' (1865), *Collected Essays*, 9 vols, iii: *Science and Education* (London: Macmillan, 1893), 66-9, 70-3 cited in *Embodied Selves*, p. 376.

⁴² John Gideon Millingen, *The Passions, or Mind and Matter* (London: J. and D. Darling, 1848), 157, cited in *Embodied Selves*, p. 169.

Against such a backdrop Eliot's representations of emotion in *The Mill* present a sobering challenge to both stereotypes of masculinity and femininity. In each the will is undermined and the vital power of emotions in rational and cognitive processes is paramount. However if this were ever in danger of signalling a lack of complication, when Maggie fleetingly allows herself to give into this bodily desire, the outcome is inevitably tragic. Abruptly halted in her effort to respond to Stephen's last passionate outpouring in his letter, the waters rise around Maggie's feet. In the end Eliot's experiment with her rebellious, all too-feeling heroine is truncated by the flood; a narrative solution which both resolves her passion for Stephen but also permits the triumphant romantic hyperbole of her reunion with Tom.

In his essay 'George Eliot and *Mauvaise Foi*' Fredric Jameson's argues that unlike the stage villain who was all exterior, the nineteenth-century novel found the inward exploration of the pathologically malevolent villain and wickedness exceedingly problematic: examples up to the mid-nineteenth-century are limited. Invariably the villain was characterised by what Jameson calls 'the excuse of sheer obsession', citing Thackeray's wrathful Mr. Osbourne from *Vanity Fair*.⁴³ Whilst there are acts of harm, the 'element' of evil, as such, is only found in the merest traces in Eliot's fiction: Grandcourt for example acts maliciously. In accordance with this view, in *The Mill on the Floss* 'the excuse of sheer obsession' - or monomania - is used to characterise a fleeting 'evil' but only to show an inward struggle rather than a totalising character trait. Jameson argues that George Eliot's devotion to revealing the intricacies of 'reactions and perturbations' arising from social interaction enabled her anti-moralizing project which rejects, what he calls an 'ethical binary'.⁴⁴ This rests on a rejection of psychological descriptions with reified 'elements' based on the former passions (and faculty psychology), as these are always just figural descriptions which prop up a system of morality, or the 'ethical binary'. Eliot, he notes, 'with her famous image of 'the web' ... emphasises relationality over substance: the 'individual lots,' the human lives or destinies, are meaningful only in terms of their interrelations'.⁴⁵ So the way in which her novels are multi-centred with multiple protagonists and an 'omnipresent collectivity', affirms this commitment to relationality, inter-subjectivity and the inter-mental nature of thought and emotion. Everyone is part of a whole which details both the historical disintegration of traditional communities, and also the fluidity of 'character' and 'emotion'. Individually calibrated 'emotions' are, for Eliot, more properly characterised as the product of infinite circumstance. The logic of this position leads Jameson to the view that, if Eliot can be described as having any sort of moral project, it was to

⁴³ Fredric Jameson, 'George Eliot and *Mauvaise Foi*' in *The Antinomies of Realism* (London: Verso, 2013), p. 117.

⁴⁴ Ibid. p. 120.

⁴⁵ Ibid. p. 121.

persuade us that there are no villains and evil does not exist. Within this framework, monomania can only exist rhetorically.

Without naming it as such, George Eliot implicitly alludes to monomania in *Middlemarch* when an act of homicidal monomania is included in the text to serve as a sensational, melodramatic warning to Tertius Lydgate on the dangers of impetuous love. This episode is explored by Simon During (1988) who was the first to locate it within debates about monomania and its relationship to criminal responsibility. According to During, Eliot consciously echoed the notorious case of the servant Henriette Cornier in France who impetuously severed her mistress's baby's head and tossed it into the street, subsequently claiming to be temporarily insane (and avoiding the guillotine herself).⁴⁶ In *Middlemarch* the episode in question serves as exposition. Like Dr. Frankenstein, and before his later textual incarnation as a medical pragmatist, the young Lydgate is for a time consumed by an interest in physiology and galvanism, spending time experimenting with electric shocks upon the bodies of frogs. This distinctly Shelleyesque Lydgate visits the theatre nightly to watch an actress, Madame Laure, with whom he is hopelessly in love. During one such performance he witnesses what appears to be a tragic accident when she stabs her fellow actor and off-stage husband. In her subsequent confession to Lydgate she admits that the idea came to her impulsively during the play and that she actually did mean to stab him, as he 'wearied' her and had also refused to live in her native Provence. Lydgate now 'saw this woman – the first to whom he had given his young adoration – amid the throng of stupid criminals' and he resolves to 'take a strictly scientific view of women' thereafter.⁴⁷ This hardening against any association of romance with love sets Lydgate up for his more calculated (although disastrous) choice of Rosamond Vincy. It also places Madame Laure's notional 'monomania' firmly in the realm of sensation, rhetoric and hyperbole. With echoes in other contemporaneous imaginings of familial murder and crime, Madame Laure's antics would not, for example, have seemed out of place in a novel by Wilkie Collins or Mary Elizabeth Braddon. In the world of *Middlemarch* however, Lydgate's 'scientific' view of women proves tragically misguided. In *Daniel Deronda* (1871-72) Eliot invokes monomania to suggest Deronda's inward doubts in relation to Mordecai. He is 'the consumptive-looking Jew' and elder brother of Mirah

⁴⁶ Simon During, 'The Strange Case of Monomania: Patriarchy in Literature, Murder in *Middlemarch*, Drowning in *Daniel Deronda*', *Representations*, 23 [1988] pp. 86-104. Although it is not a term that is explicitly used in *Middlemarch*, During makes a broader case for Dorothea Brooke as a monomaniac, and similarly for Gwendolen Harleth in *Daniel Deronda*, as both have husbands whom they would comfortably see dead. This not unproblematic as it retrospectively diagnoses fictional characters' states of mind and conflates the more fluid idea of 'monomania' with the narrower 'homicidal monomania'. The real life diagnosis of homicidal monomania given to Henriette Courrier seems considerably removed from the considered response of Dorothea to Casaubon, and Gwendolen to Grandcourt. During, however, suggests that Eliot characterises their experiences as monomaniacal in order to portray the extremity of women's responses to a violent patriarchy.

⁴⁷ George Eliot, *Middlemarch*, ed. by Rosemary Ashton (London: Penguin, 1994) p. 153.

Lapidoth, the young Jewish woman who Deronda saves from throwing herself into the Thames and eventually marries. Eliot associates Mordecai early on with her cherished Baruch Spinoza and a visionary, mystical, poetic proto-Zionist philosophy (398).⁴⁸ Increasingly frail, Mordecai is driven by a wish to find a physically imposing, charismatic, cosmopolitan protégée who will continue his work in seeking a homeland and inspire admiration in other Jews. Deronda fits this 'inward imprint' but is yet to learn definitively of his own Jewish heritage. For a time, Mordecai is solely preoccupied with Deronda; he is 'the clutch of a single thought' on the otherwise scholarly, contemplative man's consciousness. Watching the waving Mordecai from Blackfriars' bridge, Deronda recalls the vulgar shop-keeper Cohen's gesture – putting out his tongue slightly and tapping his brow – to indicate Mordecai's allegedly weak grasp on sanity (417). However he reassures himself and concludes:

[...] the first-prompted suspicion that Mordecai might be liable to hallucination of thought – might have become a monomaniac on some subject which had given too severe a strain to his diseased organism – gave way to a more submissive expectancy. His nature was too large, too ready, to conceive regions beyond his own experience, to rest at once in the easy explanation, 'madness', whenever a consciousness showed some fullness and conviction where his own was blank (417-8).

But again following this meeting, Deronda is driven to speculate as to Mordecai's mental state. Hesitating in case he is being swept along by pity, he imagines his guardian, Sir Hugo Mallinger, voicing sceptical, 'negative whisperings' about Mordecai:

Scattered here and there in every direction you might find a terrible person, with more or less power of speech, and with an eye either glittering or preternaturally dull, on the look-out for the man who must hear him; and in most cases he had volumes which it was difficult to get printed, or if printed to get read. This Mordecai happened to have a more pathetic aspect, a more passionate, penetrative speech than was usual with such monomaniacs: he was more poetical than a social reformer with coloured views of the new moral world in parallelograms, or than an enthusiast in sewage; still he came under the same class (430).

Aristocratic, conservative, usually judicious and fondly regarded, Deronda imagines Sir Hugo's monomaniacs as an assortment of political and religious zealots who champion causes, like those in Parliament, which Sir Hugo finds eccentric but are in fact infinitely justified (sanitation for example). This ironically drawn reflection hints at Deronda's essential

⁴⁸ Baruch Spinoza was Jewish but shunned throughout his lifetime by his native Dutch Portuguese Jewish community. He is a possible a model for the character of Mordecai.

confidence in Mordecai and over time his view of the older man becomes one of loving admiration; he comes to regard him as 'exceptional'. Re-visiting Latimer's auditory metaphor of insect activity to represent consciousness, Eliot considers the majority of 'narrow', Tulliver-like thought: 'But were not men of ardent zeal and far-reaching hope everywhere exceptional?—the men who had the visions which, as Mordecai said, were the creators and feeders of the world—moulding and feeding the more passive life which without them would dwindle and shrivel into the narrow tenacity of insects, unshaken by thoughts beyond the reach of their antennae' (576-7). 'Narrow tenacity' and unquestioning activity are thus symptoms of automatic behaviour as opposed to the 'exceptional' which is easily derided as 'monomaniacal'. The mystical Mordecai's unreliably reported insanity, by Sir Hugo and Ezra Cohen, suggests that a casual, popular 'scientific' understanding of the mind was sometimes fodder for Eliot's creative manufacture of narrow prejudice. Although 'real' insanity was increasingly corralled within the confines of 'cerebral disease' and inherited taint, the high orders of human emotion, beyond those of the 'melancholy chimpanzee' were, for her, still perplexing and fraught with enduring mystery. As she put it in a letter: '... molecular physics is not the direct ground of human love and moral action any more than it is the direct means of composing a noble picture'.⁴⁹ Her novels repeatedly show that the limits of consciousness restrict any capacity for self-regulation, no matter how strenuous the moral effort and however stigmatising and illegitimate the self's actions might be. Passion might be misrepresented as a monomania but to no enduring consequence. The question, therefore, of how far the ethical evolution of the species was possible given such a poor prognosis for the will meant that, for George Eliot, Herbert Spencer's perfect man, the high product of mental faculties shaped over time, whose own nature 'spontaneously' functioned for, and in accordance with, the interests of the social organism, might well be some way off.⁵⁰

⁴⁹ Moira Gatens, 'Philosophy', in *George Eliot in Context* ed. by Margaret Harris (Cambridge: Cambridge University Press, 2013), p. 216.

⁵⁰ See Delia da Sousa Correa, *George Eliot, Music and Victorian Culture* (Basingstoke: Palgrave, 2003) p. 107.

Conclusion

This thesis has explored the range of monomania's discursive meanings in nineteenth-century fictional works and examined how the idea was used to ask questions of the 'Victorian self'. I have argued that fiction did not just exemplify the idea's biography, but participated in, and created, it. We have seen how monomania quickly ventured beyond its formative Esquirolian circumscriptions. Achieving a modest fame in the French assizes of the 1820s where it accounted for a sliding scale of misdemeanours from heretical pronouncements through to apparently impulsive acts of murderous violence, its early democratisation in newsprint meant that its intended use as a tool to be handled solely by a select coterie of clinicians was irredeemably upset. Superficially a term of medical usage, it quickly became something else: a quantifier or superlative of emotion, as well as an occasionally incarcerable pathology. Once absorbed by imaginative narrative, it might be used by writers to earnestly insist upon an excess of feeling. More often it was tinged with the irony of a diagnostician's motivations and frequently used as an accusatory short-hand for transgressive thoughts, be they criminal, moral or emotional. However, never fixed or immutable, its meanings morphed according to a process of accumulative selection with writers as selectors.

I have argued that these inflexions of meaning can be broadly traced following an arc. The importance of this arc is its relationship to patterns in the wider development of Victorian psychology and constructions of the self. Above all, this thesis offers a study in the cultural contingency of a psychiatric idea. Monomania is at once a barometer of developments in a wider psychology, and simultaneously at the mercy of its (by no means unified) discursive vagaries. Rick Rylance has explained how the new discipline of Victorian psychology was 'rumbustious', 'fertile' and 'multiplex'; monomania was free to flourish in this absence of monolithic regulation.⁵¹ I have characterised its three phases of development as beginning with the category's initiation as a disorder of affectivity or, more plainly, an emotional 'excess'. Offered to the public as a disease of increasing civilisation, Esquirol's new category also incorporated sops to more traditional outlooks, carrying traces of the old humoral notion of excess. Still treated in the asylum by purging and bleeding, its conceptualisation as a surfeit of liquid operated both as a literally envisaged phenomenon and simultaneously as a metaphor for the 'fluidity' of emotion. Similarly its alleged causes looked to the past and to the 'now': everything from hair colour, the seasons, the moon and the English climate ('the foggy atmosphere of England is the principal cause of the great number of suicides'), as well as more

⁵¹ Rick Rylance, *Victorian Psychology and British Culture 1850-1880* (Oxford: Oxford University Press, 2000), p. 15.

modern causes such as the increased pace and stimulation of city living, professional over-reach and ambition, were all given some share of the blame in triggering this new mental disease.⁵² In this way it offered an important bridge between the madness of antiquity and a new secular psychiatry. Crucially however, its great significance was that by fracturing the psyche into operable and inoperable parts, it suggested a spectrum of sanity/insanity.

Sally Shuttleworth has demonstrated how the wide potentiality of such incipient madness was linked to a concomitant need for self-regulation. She argues that a drive towards 'mental economy' worked in direct parallel with the need for social regulation and economic order in the first half of the nineteenth-century.⁵³ This is exemplified by Samuel Smiles's book of instructive character sketches of famous men, *Self-Help* (1859), in which he counselled that the body's energy should be productively channelled. His doctrine of perseverance, work and endeavour, endorsed a pedigree that could be acquired rather than conferred by birth. This thesis builds upon this important identification of the material, economic drivers for early psychiatric ideas. Whilst I agree that monomania was used in the asylum as an instrument of Foucauldian panoptical surveillance which policed social ills by the internalisation of strict moral codes, I have also shown that its 'official' use as a diagnostic category was quickly undermined and scarcely applied. With no imperative for a diagnosis in order that disease-specific treatments might be applied, monomania was more rhetorical than practical. And in terms of its rhetorical use, in both popular and high-brow literature I have shown that it was used in an entirely raucous, democratic way. In so doing, I have highlighted how a range of other discursive 'cures' for the self's ills were privileged.

Following its optimistic and liberal use in the courtroom, and subsequent testing exposure in the unforgiving columns of the English news press (most especially when roundly satirised in 1843), in its second phase monomania's meanings were irreversibly disrupted. The word had already reached its peak in French in 1838 (see n-gram on page 3) and was discredited by the forensic psychiatrist Jean-Pierre Falret (1794-1870) in his paper *De la non-existence de la monomanie* (1854) which argued that delusions are rarely limited to a unique idea.⁵⁴ But in English the notion that mental illness can be neatly confined to one thing, that there is a singular key to a person's delusions, had become culturally embedded and it secured a more lingering presence on this side of the Channel. Whilst its psychiatric potency began to wane with records showing its sparing use, mounting professional criticism of the particular

⁵² E. Esquirol, *Mental Maladies: A Treatise on Insanity* (1838), trans. by E. K. Hunt (Philadelphia: Lea and Blanchard, 1845), p. 31.

⁵³ Sally Shuttleworth, *Charlotte Brontë and Victorian Psychology* (Cambridge: Cambridge University Press, 1996), p. 47.

⁵⁴ Thomas Lepoutre and Tom Denning, 'De la non-existence de la monomanie', by Jean-Pierre Falret (1854): Introduction and translation (Part 1), *History of Psychiatry*, 23:356 (2012) 356-370.

tendency for its impulse-based defences afforded it an increased publicity which ironically served only to strengthen monomania's cultural longevity. By the mid century notions of responsibility and the free will were under pressure: the possibility that the mind might successfully repress the body ebbed. Monomania's version of a fractured psyche had long indicated that, as Shuttleworth puts it, 'Cartesian man ceased to exist' but here was an intensification of this break with the past.⁵⁵ With the rise of physiological psychology exemplified by Herbert Spencer's *The Principles of Psychology* (1855), by the late 1850s monomania had more or less disappeared from asylum records with an emphasis on uncontrollable, unconscious forces not accounted for by faculty psychology. This instigated a third phase in monomania's life-cycle in which there was a gradual deterioration in the concept's viability. De-coupled from the metaphysics of emotion, the idea began to decline in the cold laboratory of brain science, before securing some further durability with a strengthened emphasis on its incarnation as a disturbance of the intellect.

In their *Manual of Psychological Medicine* (1858), the first comprehensive text book aimed at students of the new psychiatric discipline, John Bucknill and Daniel Tuke strenuously attempted to preserve Esquirol's concept of monomania by absolutely removing its association with 'emotional insanity'. They insisted that it was either a problem of the will or 'instinctive', for which we might read 'impulsive'. They advised their students on a modified reading of Esquirol's writings as follows:

The man who is 'gay, petulant, rash, and audacious,' can scarcely be called, with any propriety of language, a monomaniac. Of his three varieties of monomania – intellectual, affective, and instinctive - we think that the first and third can alone lay claim to anything like accuracy of definition [...] all that need be implied [...] is that a marked predominance of certain feelings or ideas exists, in the magic circle of which the individual is unmistakably mad, while without it he is as rational as most people. If more than this be looked for, the student will often think that he has discovered polymania, when he has been told that the patient offers an example of monomania.⁵⁶

The recognition that one might easily invent a new term 'polymania' gives away the idea's increasing medical fragility. Bucknill and Tuke had opened their fifth chapter, 'On The Definition of Insanity, and of Classification', with a quote from Samuel Johnson concerning attempts to define poetry, namely, 'that such attempts at definition will only show the narrowness of the definer' and they also admitted that, 'very different arrangements have been

⁵⁵ Ibid. p. 51.

⁵⁶ John Charles Bucknill and Daniel H. Tuke, *A Manual of Psychological Medicine containing the History, Nosology, Description, Statistics, Diagnosis, Pathology, and Treatment of Insanity* (Philadelphia: Blanchard and Lea, 1858), p. 179-180.

made by different writers of the symptoms manifested of the insane'.⁵⁷ In what is a default for Victorian medical writing, an apologetic tone for the bombastic rhetoric of scientific objectivity grapples once again for a defence by invoking literature.

The incarcerable nature of madness, its conflation with moral deviance (such as 'monomania with unnatural propensities'; 'monomania with theft'; 'monomania with drunkenness') and criminality generally, may have been part of a programme marketed as reforming and liberal, but its lasting effect was to stigmatise the mental ill. By removing monomania from their discussion of 'emotional insanity', Bucknill and Tuke suggested that aberrant 'emotions', or as they styled it, 'feelings', were the consequence of what they call 'perversion'. In this way Esquirol's 'excess' gave way to a more physiologically encoded discourse laden with a more pernicious ideology. Any benign associations monomania inherited from the more poetically acceptable 'melancholy', rapidly disappeared from the asylum given its disproportionate representation amongst the down-at-heel. By the late nineteenth century new ideas formed, building upon James Cowles Prichard's enduring rival idea, 'moral insanity' with its in-built narrative of moral decrepitude which sat more comfortably with the miserabilism of degeneration theory, and then ideas such as neurasthenia, neurosis and other characteristically 'obsessive' categories emerged.^{58 59} These fed into German psychiatrist, Emil Kraepelin's (1856-1926) category of *dementia praecox* (premature dementia), a forerunner of schizophrenia. In wider discourse monomania gradually elided into the more benign 'obsession', with its military etymology of doggedly laying siege to something. With these more figurative roots, 'obsession' did not begin life with the medical inscriptions of monomania and in today's classifications only when allied with the word 'compulsive' (as in Obsessive Compulsive Disorder) does it warrant the status of a modern psychopathology.

In this thesis I have argued that monomania was always a literary idea in its very essence: structurally, referentially and, crucially, in its dissemination. One of Esquirol's innovations was to make the literary idea of a single tragic flaw, medically modern. The cheap printing technology of the nineteenth century allowed the idea of monomania to sound a new note on subjectivity amidst the cacophony of paper discourse. So in a brief, but intense period,

⁵⁷ Ibid. p.89.

⁵⁸ See Lennard J. Davis, *Obsession: A History* (Chicago: Chicago University Press, 2008), p. 69.

⁵⁹ Monomania is often confused with 'moral insanity'. This was a category introduced by James Cowles Prichard (1786-1848) in *A treatise on insanity and other disorders affecting the mind* (London: Sherwood, Gilbert and Piper, 1835). He described disorders of affection or feeling as moral insanity, whereas monomania was limited to a partial insanity in the intellectual faculty. This caused added confusion amongst Victorian diagnosticians.

from the 1830s through to the 1850s it spread over Europe, not just in the clinics of England, France and Germany, where its actual use was sparing and has been frequently over-stated, but in the imaginations of writers and readers. Where previous studies have tended to see the idea imported into literature from early mind-science and used primarily to discipline the female psyche or else, simply decorated by literary flourishes in expository treatises on mind disease, we have seen in the preceding chapters that it was in fact a far more disorderly, subversive idea. I have offered readings of *Wuthering Heights*, *The Tenant of Wildfell Hall*, *Shirley*, *Villette*, *Mary Barton*, and *The Mill on the Floss*, which attest to its diversity of meaning. It initially appeared as part of a cod-scientific discourse voiced by the unqualified as medico-gossip to discredit the romantic projects of the heroes and suitors in these first three novels. Then its range evolved to signal pathogenic environments, emotional self-surveillance and then (in order to entertain readers) controlling husbands. In the fictions of Dinah Craik and ‘Thomas Waters’ it morphed from an heroic affliction to a villainous one. With this range of literary usage its singular focus was always paradoxically pluralistic. I have argued that it worked in concert with the agendas of these writers encompassing Gaskell’s Unitarian radicalism, Charlotte Brontë’s Protestantism, Craik’s hesitant but materially-minded proto-feminism, and Eliot’s insistence on the complexity of the relationship between the will and the body. This pre-Sensation history of the idea illuminates a wider public frustration with the glib limitations of diagnosis expressed most emphatically in Charles Reade’s later excoriating version of the mind-doctor Wycherley in *Hard Cash* (1863) which was a partial portrait of moral management pioneer (and Alexander Morison’s mentor), John Conolly.

In *Mary Barton* Elizabeth Gaskell’s account of industrial Manchester equates the pathogenic with the gothic. The direct effects of hunger and destitution on the working-class psyche in this novel give the most ‘accurate’ account of the causes of mental disease in the sense that John Barton and Aunt Esther reflect the socio-economic make-up of the greater part of the asylum population in the 1840s. But for Gaskell the carving up of mental suffering into particular types was a middle-class ‘luxury’ and as I have argued the ‘monomanias’ of this novel are constructed to elicit sympathy. They reflect grievance rather than insanity. Both John Barton and Esther are shown to be at great pains to control their feelings, resorting to a vicious cycle of self-medication which accompanies an accelerated decline in the health of both. Unsurprisingly, cases of self-diagnosis in the asylum were highly unusual and on the rare occasion they did occur they appear to be motivated by an ulterior desire to remain bound by the institution. Despite this, in literary texts, monomania, like its antecedent, melancholy, is represented by Charlotte Brontë and George Eliot as part of a self-styled, self-diagnosed condition: a way to discipline the self to fall in line with perceived convention. In both *Villette*

and *The Mill on the Floss*, the appropriate display of feeling and a lacerating self-awareness constrain not only the heroines of these novels, but also (albeit more fleetingly) the dandy Stephen Guest, in Eliot's examination of consciousness and the limits of the will in controlling emotion. It is Dinah Craik who perhaps best anticipated the fictive potential of monomania. Wife Barbara's fragile existence, in which she is denied a meaningful identity is perpetuated by a madman. 'The Double House' does not purport to be comprehensively educative but instead offers a figurative version of the disorder: a domestic nightmare which Craik fashions for her spinster readership, such that they might satisfy themselves that marriage is actually not an unfailing source of blissful closure.

One of the major aims of this thesis has been to trace the idiosyncratic uses of the word 'monomania' in order to record the idea's life and death. In view of the fact that Esquirol's neologistic madness was a franchise made more democratically accessible via print, and especially via the novel, this work is not exhaustive. There was a corresponding influence of psychiatry on poetry, especially in the work of Alfred Tennyson and Robert Browning. Forbes Winslow's *The Journal of Psychological Medicine and Mental Pathology* printed a number of dramatic monologues, a form which replaced traditional morality with something more situational and 'psychological' in depicting the insane, offering another example of the symbiosis between literature and early psychiatry.⁶⁰ Jenny Bourne-Taylor and others have considered the complex cultural meanings of monomania post-1860 where Sensation Fiction fully begins. Although I have argued that monomania was no longer widely viable as a 'psychiatric idea' given its withdrawal from the official records, it certainly endured culturally into the early twentieth century. Taylor's rich historicist scholarship has outlined the ways in which Mary Elizabeth Braddon and Wilkie Collins used ideas of insanity to test ideas of identity, consciousness, responsibility and inheritance. *Lady Audley's Secret* (1862) is particularly astute in its treatment of the uncertainty around diagnosis. As Taylor has argued Braddon subverts the wrongful incarceration plot of *The Woman In White* (1859) by turning it on its head. In a clever narrative twist, her protagonist, the 'mad' but satisfyingly resourceful Lucy Graham plays on doubts concerning proto-Detective Robert Audley's mental soundness, accusing him of pursuing *her* with a monomania.⁶¹ Coupled with her step-nephew's barely disguised homoerotic quest to find his friend (and bigamist Lucy's erstwhile husband), George Talboys, this accusation plays on prejudiced conceptions of homosexuality and insanity by casting a hint of doubt on his motives. Perhaps he is madly in love rather than driven by a

⁶⁰ See Ekbert Faas, *Retreat into the Mind: Victorian Poetry and the Rise of Psychiatry* (Princeton: Princeton University Press, 1988), p. 162.

⁶¹ Jenny Bourne-Taylor, Introduction to *Lady Audley's Secret* by Mary Elizabeth Braddon (London: Penguin Classics, 1998).

rational search for the truth. In both Collins's and Braddon's novels, the various scandals of wrongful incarceration in England's asylums in the 1860s, usually to frustrate testamentary capacity, are clearly reflected.⁶²

Similarly throughout this thesis my focus has been on literature published and widely read in England from 1836-1860 but, whilst beyond my scope, the literatures of adjacent countries would also offer sites of rich exploration. I have not, for example, included Herman Melville's *Moby-Dick, or The Whale* (1851) and French novels by Eugène Sue and Honoré de Balzac which also mention monomania. Just as Ahab himself is referred to as a monomaniac over a dozen times in *Moby-Dick*, the sense that the wider crew have been touched by this contagion, that the microcosmic *Pequod* is 'the material counterpart of her monomaniac commander's soul' is compelling.⁶³ In fact the very form of the novel, with its encyclopaedic details and emphasis on whaling, is itself monomaniacal. In his wider use of emerging psychology Melville playfully offers ample demonstration that nineteenth-century fiction did not benignly absorb contemporaneous mental science, but questioned its fragile explanations.

None the less what cannot be denied in my overall consideration of monomania is the extent to which the reading public is alerted to a new danger for the self. Monomania is always untreatable and it has the potential to infect all. Its narratives are never the stuff of therapeutic cure. As it circulates in the wider popular discourse, the exciting possibilities of a multi-layered consciousness are framed as a danger. Here is a modern plague for the new industrial era in which the calibration of emotion has arrived. Despite its early emergence as a concept which had helped to transform the geography of madness by shifting it into the asylum, monomania's real instrumental role was in a much wider pathologization of feeling and thought outside of its confines. This would require a whole new raft of therapeutic tools in the coming decades of the late nineteenth and early twentieth centuries.

⁶² See especially Jenny Bourne Taylor, *In the Secret Theatre of the Home: Wilkie Collins, Sensation Narrative and Nineteenth-Century Psychology* (London: Routledge, 1988).

⁶³ Herman Melville, *Moby-Dick or, The Whale*, ed. by Harrison Hayford, Hershel Parker, and G. Thomas Tanselle (Harmondsworth: Penguin, 1992) p. 463.

Appendix (i): Table showing works of fiction in English using the words ‘monomania’ or ‘monomaniac’ in the nineteenth and early twentieth centuries

Pub.yr.	Publisher	Author	Title
1835	<i>Southern Literary Messenger</i>	Edgar Allan Poe	<i>Berenice</i>
1836	<i>The Ladies Cabinet of fashion, music, and romance</i>	Anonymous	<i>The Monomaniac</i>
1838	<i>The US Democratic Review</i>	Nathaniel Hawthorne	<i>Legends of the Province House</i>
1847	T. C. Newby	Ellis Bell	<i>Wuthering Heights</i>
1848	T. C. Newby	Acton Bell	<i>The Tenant of Wildfell Hall</i>
1848	Chapman and Hall	Elizabeth Gaskell	<i>Mary Barton: A Tale of Manchester Life</i>
1849	Bradbury & Evans	Charles Dickens	<i>David Copperfield</i>
1849	Smith, Elder and Co.	Currer Bell	<i>Shirley: A Tale</i>
1851	Richard Bentley	Herman Melville	<i>The Whale</i>
1852	<i>Chambers's</i>	‘Thomas Waters’	<i>The Monomaniac</i>
1852	Richard Bentley	Wilkie Collins	<i>Basil: A Story Of Modern Life</i>
1853	Smith, Elder and Co.	Currer Bell	<i>Villette</i>
1853	Bradbury & Evans	Charles Dickens	<i>Bleak House</i>
1855	<i>Fraser's Magazine</i>	Wilkie Collins	<i>Mad Monkton</i>
1857	Hurst and Blackett	Dinah Craik	<i>The Double House</i>
1859	<i>All The Year Round</i>	Wilkie Collins	<i>The Woman In White</i>
1859	Chapman and Hall	George Meredith	<i>The Ordeal of Richard Feverel</i>
1860	William Blackwood	George Eliot	<i>The Mill on the Floss</i>
1861	Chapman & Hall	Charles Dickens	<i>Great Expectations</i>
1862	William Tinsley	M. E. Braddon	<i>Lady Audley's Secret</i>
1863	Sampson Low Son	Charles Reade	<i>Hard Cash</i>
1866	William Tinsley	M. E. Braddon	<i>The Lady's Mile</i>
1869	Strahan and Co.	Anthony Trollope	<i>He Knew He Was Right</i>
1876	William Blackwood	George Eliot	<i>Daniel Deronda</i>
1893	<i>San Francisco Examiner</i>	Ambrose Pierce	<i>John Bartine's Watch: A Story by a Physician</i>
1895	William Heinemann	H. G. Wells	<i>The Time Machine</i>
1904	<i>The Strand Magazine</i>	Arthur Conan Doyle	<i>The Adventure of the Six Napoleons</i>
1911	William Rider	Bram Stoker	<i>The Lair of the White Worm</i>
1915	George H. Doran	W. Somerset Maugham	<i>Of Human Bondage</i>

Appendix (ii): The Double House⁶⁴

‘James, the house is let.’

‘Which?’ said Mr Rivers, never looking up from his dinner — for a dozen patients, scattered over a dozen square miles, were awaiting him.

‘The house — the Double House. The one that everybody thought would never get a tenant. But it has got one.’

‘Who?’

‘A Dr Merchiston, a physician; but luckily for us, he does not practise. He is a man of large fortune.’

‘Married?— children?’

‘I really don't know. But I should rather think not. Most family men would object to that very inconvenient house. It might suit an eccentric bachelor, who could live alone in the one-half, and shut up his domestics in the other, locking the door of communication between. But for a mistress and mother of a family — dear me ! — one might as well live in two separate houses. One never could hear the children cry of nights; and the maids might idle as much as they liked without-- ‘

Here I turned round, finding I was talking to the air. My husband had disappeared. It was in vain to attempt to interest him about the Double House, or the people that were coming there.

But as to the rest of our village — speculation ran wild concerning the newcomers. First, because a grave, dignified, middle-aged gentleman like Dr Merchiston — of such composed and quiet manners, too — had chosen to live in this eccentric and uncomfortable mansion. (For, as before stated, it went by the name of the Double House, and consisted of two houses joined together by a covered passage and door of communication, each having its separate entrance, and being, in fact, a complete dwelling.) Secondly, because,

⁶⁴ This free e-text has been uploaded to the internet by the University of Illinois and can be found at <https://archive.org/details/nothingnewtales> I include this copy here for reference.

when the furniture was sent in, it was discovered to be the appointments of two distinct habitations; namely, two drawing-rooms, two dining-rooms, two kitchens, and so on. The wonder grew — when Dr Merchiston, accompanied by an elderly person, ‘Mrs Merchiston’s maid’ (there was a Mrs Merchiston, then!) inducted into the establishment two distinct sets of domestics; two cooks, two housemaids, &c.

And now everybody waited for the master and mistress, who, we learnt, had to make a long journey from London by post — for all this happened when I was a young married woman, more than forty years ago. I had my hands empty then — possibly, my head too, for I remember loitering about the whole day, and sitting lazily at parlour windows, just to catch this first sight of my new neighbours. Nay, I will confess that when the chaise and four thundered past our house, I peeped from under the blind.

In the carriage I saw only the elderly female servant, and a figure leaning back. Dr Merchiston was certainly not there.

Half-an-hour afterwards he galloped past in the twilight to his own door, which closed upon him as quickly as it had, a short time before, closed upon the others.

‘Well, they are come,’ said I to James that evening.

‘Who?’ he ejaculated most provokingly.

‘The Merchistons of course. And nobody is a bit the wiser.’

My husband put on his quaintest smile (a merry man, children, was your grandfather) —

‘Never mind — there’s Sunday coming.’

My hopes revived; I led a dull life in James’ long absences, and had been really anxious for a neighbour— a pleasant neighbour — a true gentlewoman. Yes, of course we should see the Merchistons at church on Sunday, for a large pew had been taken, cushioned and hassocked to perfection; besides, the Doctor looked like a respectable church-going gentleman.

And sure enough, when service began, above the high pew, distinct to the eye of the whole congregation, rose his tall head and shoulders.

He was in the prime of life, though his hair was already, as we say of a September tree,

‘turning.’ He had a large well-shaped head, very broad across the crown, just where my grandson tells me lies the bump of conscientiousness; but we never thought of such folly as phrenology in my days. For the face — I do not clearly remember the features, but I know the general impression conveyed was that of a strong will, capable of any amount of self-control or self-denial. The eyes, though honest and clear, had at times much restlessness in them; when steady and fixed, they were, I think, the saddest eyes I ever saw. His countenance was sickly and pale, though he flushed up once or twice on meeting the universal stare; which stare increased tenfold when he actually repeated audibly and devoutly the responses, which the Rubric enjoins on the congregation, and the congregation usually delegates to the charity-boys and the clerk.

Except this we could find nothing extraordinary in Dr Merchiston's appearance or behaviour. He sat in his pew, alone: he went out as he had entered, silently, quietly, and alone. In another pew sat two of the house-servants, and Mrs Merchiston's maid.

The lady herself did not come to church at all that day.

It was rather disappointing — since, by Apedale etiquette, no one could call on Mrs Merchiston until she had appeared at church. But we heard during the week that the Rector had called on Dr Merchiston.

I tried to persuade Mr Rivers to do the same — it would be only kind and neighbourly. After half-an-hour's coaxing, which apparently was all thrown away, he briefly observed —

‘Peggy, I've been.’

‘Oh! do tell me all about it, from the very beginning. Which door did you knock at? The one with a brass plate, and ‘Dr Merchiston’ on it?’

‘Yes.’

‘And you saw him? You were shown up to the drawing-room — or the library?’

Which?’

‘Library.’

‘Was he alone? Was he polite and pleasant? Did you see his wife?’

Two nods and a shake of the head were all the answer I received to these three questions.

'Dear me! How odd! I hope you inquired after her? How did her husband say she was?'

'Quite well.'

'Nothing more?'

'Nothing more.'

'Well — you are the most provoking man to get anything out of.'

'And you, my Peggy, are one of those excellent women who will never cease trying hard to get out of a man things which he absolutely does not know.'

I laughed; for what was the use of quarrelling? Besides, didn't I know all James' little peculiarities before I married him?'

'Just one question more, James. Have they any children?'

'Didn't ask.'

So the whole Merchiston affair stood precisely where it was — until the next Sunday. Then, in the afternoon, as I walked to church, I saw a lady come quietly out of the Double House, at the left-hand door — not the one with the brass name-plate — close it after her, and proceed alone across the road and down Church-alley.

She paused a moment in the churchyard walk, which was very beautiful in the May afternoon, with the two great trees meeting overhead, and throwing chequers of light and shade on the path leading to the porch. She looked around as if she admired and enjoyed this scene, with its picturesque groups of twos and threes, — fathers and mothers, husbands and wives, lingering about and talking till the chime of bells should cease. She looked apparently with a kindly interest on them all, and then, as if suddenly conscious that they looked back inquisitively at her, dropped her veil and hurriedly entered the church.

I heard her asking the sexton in a low voice, which seemed to belong to a woman still young, 'which was Dr Merchiston's pew?'

She was shown in, and then — being small of stature — she entirely vanished from my gaze, and that of the congregation.

Could it be that this was Mrs Merchiston?

I do not exaggerate when I say that I had six successive 'droppers-in' on the Monday morning — to my great inconvenience, for I was making my cowslip-wine — I should say my first attempt at this potent liquor — and that the sole subject of conversation was Mrs Merchiston.

'What a tiny woman!' 'How plainly dressed! Why, her pelisse was quite old-fashioned.' 'Yet somebody said she was young.' 'He does not seem above forty, either.' 'How strange that he should let her go to church alone — the first time of her appearance, too !'

Such were the comments, blended with a small quantum of lately-elicited facts, which reached me concerning my new neighbours. 'Very odd people — exceedingly queer — ought to be inquired into,' was the general conclusion. All the village began to discuss the Double House, the duplicate establishment, and the notable facts that, since their arrival, Dr Merchiston had been seen out every day, Mrs Merchiston never ; that Dr Merchiston had come to church, Mrs Merchiston staying at home, and *vice versa*.

The result was, the Apedale ladies cautiously resolved to defer "visiting' the strangers a little longer, till assured of their respectability ; and I being myself a new comer, hating gossip, scandal, and censoriousness, with the virulence of warm-hearted, all-credulous youth, duly determined to call the next day.

But first, of course, I asked my husband's leave; and gaining it, hazarded a question or two further, since James, from his profession and long standing in the county, knew everybody and everything.

'Who is he Peg? I know no more than that he is Evan Merchiston, M.D., of the University of Glasgow.'

'And Mrs Merchiston?'

"Was Barbara, only child of Thomas and Barbara Currie, late of Apedale in this county, who were drowned at sea in seventeen hundred and --'

'Stop, stop! you are like an animated tombstone reading itself aloud. The very stone — I have seen it in our own churchyard. And so she was born at Apedale? That accounts for their

coming to settle here.'

'Precisely. Anything more, Peg?'

'No, James;' for I was ashamed of my own doubts, as if that soft, mild face I caught a glimpse of under the veil, and the manly, benevolent head which I had watched the previous Sunday, did not prove, despite all gossip, that the Merchistons were 'respectable,' — even in my sense of the word which was wider than that of my neighbours, 'A respectable man' — as James once said when he was courting me, — 'a respectable man is one who is always worthy of respect because he always respects both himself and other people.'

Perhaps it was to prove my own 'respectability' in this sense, — and justly I might respect myself — namely, the happy woman who was James Rivers' wife, — that I dressed myself in my very best muslin gown of my own working, and my pretty green silk spencer and hat that my mother gave me when I was married, preparatory to calling on Mrs Merchiston.

At the Double House arose a puzzle. There were two front doors, and which should I knock at? After some doubt, I thought I could not do better than follow in my husband's steps, so I gave a summons at the door with the brass plate on it.

A man, half valet, half groom, answered.

'Is Mrs Merchiston at home?'

'I don't know, ma'am; I will inquire, if you please. Will you be so kind as to knock at the other door?'

Upon which, with some abruptness, he shut this one, and left me outside.

'Well,' thought I, 'what can it signify which door I go in at? though 'tis rather odd, too.'

However, I did as I was bidden, and was shown by a neat maid-servant into a very handsome parlour — drawing-room you would call it now, but drawing-rooms had not then reached Apedale.

By the appearance of a recently vacated sitting-room you can make a very good guess at its occupant. I soon decided that Mrs Merchiston was young, inclined to elegant tastes, especially music, that she had no children, was left a good deal alone, and

probably found herself in that dreariest position for an active mind — that of a lady with nothing to do.

After a considerably long interval she appeared. Her welcome was courteous, even friendly, though not without a slight nervousness and hesitation.

It certainly had not been her toilette that kept me waiting, for she was in the simplest possible morning-gown of nankeen, and her hair would not have taken a minute's dressing, as it curled all round her head in natural, wavy curls like a child's. Very childlike, too, were both the figure and face; I could hardly believe that she must be, from the date of her parents' death on the tombstone, nearly, if not quite, thirty years old. She was not exactly pretty, but the expression of her blue eyes was very beautiful, perfectly simple, trusting, guileless, and gay; she was, in short, just the sort of woman that I should have expected a grave man like Dr Merchiston to choose out from the world of much cleverer and lovelier women, and love deeply, perhaps even madly, to the end of his days.

I was quite satisfied, nay, charmed with her. When we parted, after a much longer chat than etiquette required, I invited her warmly to our house.

'I shall be happy to come in a friendly way, but I believe Dr Merchison does not wish for much visiting.'

This was the first time the Doctor's name had entered into our conversation, so I politely inquired after his health, stating that I had seen him in church, and hoping I should soon have the pleasure of an introduction to him. I expected she would take the hint, send for her husband, and perform the desired introduction now.

But Mrs Merchiston did nothing of the kind; she merely answered my inquiries as briefly as civility allowed, and evaded the subject.

Curiosity was too strong; I could not let it go.

'I hope sincerely that it is not on account of illness that Dr Merchison abstains from visiting. My husband thought he looked in rather weak health.'

'Does he look so? In weak health? Oh no — oh no!'

All the wife was indicated in that start — that flush — that paleness. Yet she had answered indifferently when I inquired after him; and in her conversation and the surroundings of this room there was no more trace of Dr Merchiston than if he never entered there, or indeed no longer existed. Likewise in her form of speech I had noticed not the habitual happy ‘we’ which most married people learn to use but the sad, involuntarily selfish ‘I’ of spinsters and childless widows. It was incomprehensible.

I hastened to atone for my inadvertence.

‘Indeed, my dear Mrs Merchiston, you need not be alarmed. It must be only his natural paleness, which strikes a stranger; while you who see him every day -- ‘

‘Oh, that is it — that is it,’ she hurriedly answered, and took me to the window to show me her flowers. Very soon after, I departed.

Some weeks passed; she returned my visit, and of course I paid a second. Several of our village wives and mothers called likewise. It was always the same story: they had been received with courtesy, were delighted with Mrs Merchiston, but no one ever saw her husband. And when the fathers of families one after another paid their respects to the Doctor, they likewise returned well pleased, pronounced him a pleasant, good-hearted, gentlemanly fellow, but wondered that he never introduced them to his wife.

Two dinner-parties were made for the new-comers, and the invitations accepted; but ere the first, Mrs Merchiston was ‘slightly indisposed ;’ and at the second, Dr Merchiston was ‘unavoidably absent on business.’ So that to both dinners each came alone; nevertheless, the impression they severally left behind was that of ‘exceedingly nice people.’

At this time I did not go out much; and some weeks after, your mother, children, was born. She cost me a long illness, almost my life; but she throve well, and at last I recovered. Mrs Merchiston was among my first visitors.

I was glad to see her, for she had been very kind. Many a basket of fruit and flowers had come from the Double House to ours. I thanked her as warmly as I felt.

‘And your husband too — I do believe he has shot half the partridges in the county for my benefit — I have had so many; besides, it was he who rode twelve miles to fetch James

that night they thought me dying.’

‘Was it?’

‘Did you not know? Then do tell him, Mrs Merchiston, how much I thank him for his goodness — for the comfort, the help he was to my poor James ! Ah, he could understand what a husband feels when his wife is dying.’

Mrs Merchiston stooped over the new cradle with the little one asleep. She did not speak a word.

‘But you will tell him,’ pursued I, earnest in my gratitude. ‘What an excellent man he must be!’

‘He is,’ she answered, in a tone evidently steadied carefully down, even to coldness.

‘It is always a pleasure to him to do a kindness to any one. — May I look at the baby?’

She walked up and down the parlour, lulling it on her arms. It nestled its wee face into her bosom.

‘No, I am not your mother, little one. Ah, no!’

She gave the child back to me and turned away. Her eyes were full of tears.

Then taking a chair by me, and softly stroking baby's fingers, she said, ‘Children, I believe, are a great responsibility and a heavy care; but I think it is a sadder thing still never to have had a child. There can be no love, no happiness, like a mother's; it often atones for the loss of all other love — all other happiness.’

‘Do you think so?’

‘Yes, at times. Because motherhood must for ever take away the selfishness of grief. How could a woman feel selfish or desolate — how could she indeed know any personal grief at all, if she had a child?’

‘You are speaking less as a wife would feel than a widow. And you and I, Mrs Merchiston, cannot, need not, dare not, talk as widows.’

‘God forbid,’ she said with a shiver.

I took an early opportunity of sending baby away, and talking of every-day things. I have

great pity for a childless wife, unless, as rarely happens in this world, her marriage is so supremely happy that the brimming cup leaves not another drop to be desired. Yet even then its sweetness is apt to cloy, or become a sort of dual egotism, which feels no love, sympathises with no sorrow, and shares no joy, that is not strictly its own. Forgetting, perhaps, that perfect wedded union is not meant for the satisfaction of the two only, but also that from their oneness of bliss, they may radiate a wide light of goodness and blessedness out upon the world.

I rather wondered, knowing from report and from my own experience what good people the Merchistons were, that they did not both try more to live this life, which would certainly have made them happier than she, at least, appeared. Yet, as I said, I pitied her. No one can see the skeleton in his neighbour's house, or the worm in his friend's heart; yet we know, as our experience of life grows wider, that both must assuredly be there.

Mrs Merchiston and I had a very pleasant chat; the baby had opened our hearts. We

were growing better than acquaintance — friends. We planned social evenings for the ensuing winter, in which, when he came in, Mr Rivers cordially joined.

‘And I hope we shall see the Doctor too. — Madam,’ continued he, breaking out into impressiveness, and discarding laconicism, ‘there isn't a man alive I respect more than your husband.’

She coloured vividly, but merely observed ‘You are right, — I thank you.’

We were all standing at our door, she being just about to take leave. Suddenly she drew back within. At that moment there passed close by — so close that he must have touched his wife's dress — Dr Merchiston.

He looked in, distinctly saw us all, and we him.

‘Doctor — Doctor,’ cried my husband.

In crossing the street, Dr Merchiston turned, bowed in reply, but did not stop.

‘Excuse me, I had something to say to him,’ cried James, and was off, without a glance at Mrs Merchiston.

But when I looked at her I was really alarmed. Her limbs were tottering, her countenance pale as death. I helped her back into the parlour, and made her lie down; but all my efforts could scarcely keep her from fainting. At length she said feebly —

‘Thank you, I am better now. It is very wrong of me. But I could not help it. Oh, Mrs Rivers,’ — with a piteous, bewildered look, — ‘if you had been his wife, and had not seen him for two whole years!’

‘Him! Is it possible you mean your husband?’

‘Yes, my own husband — my dear husband; who loved me when he married me. God knows what I have done that he should not love me now ! — O me! what have I been saying?’

“Never mind what you have been saying, my dear lady, I shall keep it all secret. There now, it will do you good to cry.”

And I cried too, heartily. It seemed very dreadful. That young, fond, pretty creature, to live under the same roof as her husband, and not to have seen him for two whole years. Here was explained the mystery of the double house — here was confirmation entire of those few straggling reports which, when I caught them flying abroad, I had utterly quenched, denied, and disbelieved. I was greatly shocked, and as was natural, I took the woman's side of the question.

‘And I thought him so good, and you so happy! What deceivers men are!’

‘You are mistaken, Mrs Rivers, in one man at least,’ she returned, with dignity; ‘your husband spoke truly when he said there was no man living more worthy of respect than Dr Merchiston.’

‘He has not lost yours, then?’

‘In no point.’

‘And you love him still?’

‘I do; God pity me — I do.’ She sobbed as if her heart were breaking.

There was then but one conclusion to be drawn — one only reason for a good man's thus mercilessly putting away his wife, — some error on her part, either known or imagined by him. But no, when I looked down on her gentle, innocent, childlike face, I rejected the doubt as impossible. Nor had I detected in her any of those inherent, incurable faults of temper or of character, the 'continual dropping that weareth away the stone,' which, if divorce be ever justifiable for anything short of crime, would have justified it in some marriages I have seen.

'Does anybody know? Not that I mind, but it might harm him. Mrs Rivers, do you think anybody at Apedale knows?'

'Alas, in a village like this, there can be no such thing as a secret.'

She wrung her hands. 'I thought so — I feared so. But he came to live in the country because the doctors said London air was killing me. I wish it had killed me — oh I wish it had!'

I have seen the look of despair in many a wronged, miserable wife's eyes, but I never saw it so mournfully plain as in those of poor Barbara Merchiston. I took her to my arms, though she was older than I, and asked her to let me comfort her and be her friend, if she had no other.

'Not one — not one. But' — and she started back with a sudden fear — 'you will not be my friend by becoming an enemy to my husband?'

'I have no such intention. I condemn him not: to his own Master let him stand or fall.'

Probably this was harshly spoken, for she took my hand, saying imploringly, 'Pray do not misjudge either him or me. I was very wrong in betraying anything. But my life is so lonely. I am not strong; and this shock was too much for me. How ill he looked — how gray he has grown! Oh Evan, my poor husband!'

To see her weeping there, without the slightest anger or wounded pride, roused both feelings in me. I determined to fathom this mysterious affair; and, braving the usual fate of those who interfere between man and wife, — namely, being hated by both parties, — to try and remedy

it if I could.

‘Tell me, my dear Mrs Merchiston — believe me it is from no idle curiosity I ask, how long has this state of things lasted?’

‘For five years.’

‘Five years!’ I was staggered. ‘Entire separation and estrangement for five years! And for no cause? Are you sure — oh forgive me if I wound you, — but are you sure there is no cause?’

‘I declare before Heaven — none! He has never blamed me in word or deed.’

‘Nor given you reason to blame him?’ said I, with a sharp glance, still strongly inclining to the rights of my own sex.

‘Me — blame him? — blame my husband?’ she answered, with a look of half reproachful wonder. ‘I told you he loved me.’

‘But love changes,’ continued I, very cautiously, for it was hard to meet her large innocent eyes, like a gazelle's with your hand on its throat. ‘Men sometimes come to love other women than their wives.’

She flushed indignantly all over her face; ‘You wrong him — you wickedly wrong him. His life is, and always has been, as spotless as my own.’

Well, thought I, I give it up. Either she is extraordinarily deceived, and the hypocrisy of that man is such as never was man's before, or the problem is quite beyond my solving. Yet — one more attempt.

‘Just a word. Tell me, Mrs Merchiston, how and when did this sad estrangement begin?’

‘Six months after our marriage. We married for love; we were both alone in the world; we were all in all to one another. Gradually he grew melancholy, I could not find out why; he said it would pass away in time. Then he had a fever — I nursed him through it. When he recovered — he — sent me away.’

The brute! I thought. Just like a man! ‘But how?’ I said aloud. ‘What reason did he give? What excuse could he offer?’

‘None. He only wrote to me, when away on a short journey, and told me that

this separation must be — that it was absolutely inevitable — that if I desired it he would leave me altogether — otherwise, it was his earnest wish we should still live under the same roof. But never, never meet.’

‘And you never have met?’

‘Very rarely, only by the merest chance. Then he would pass me by, never lifting his eyes. Once — it was in the first few weeks of our separation — I met him on the staircase. I was different from what I am now, Mrs Rivers; very proud, outraged, indignant. I flung past him, but he caught me in his arms. I would not speak; I stood upright in his clasp like stone. ‘We have been happy, Barbara.’ ‘But never can be again,’ I cried passionately. ‘No,’ he said; ‘I know that; — never again.’ He held me close, a moment or two, then broke from me. We have never met since.’

Such was her story, which the more I dived into it, became the more incomprehensible. No condemnatory evidence could be found against the husband ; in all things Mrs Merchiston's comforts were studied, her wishes gratified. She said it often seemed as if an invisible watch were kept over her, to provide against her least desire. I could only counsel the poor wife to patience, hope, and trust in God.

She left me a little comforted. I asked her would she not stay? Was she not afraid of meeting him in the street?

‘Oh no,’ she sighed, ‘he seems to know intuitively my goings out and my comings in. I never see him, never, not even by chance. I cannot guess how it happened to-day. How ill he looked!’ she added, recurring again to what seemed uppermost in her thoughts. “Mrs Rivers, will you entreat your husband to watch over him — to take care of him? Promise me you will.’

I promised her, poor tender thing, and inwardly determined to watch him myself with a closer eye than that of my simple-hearted husband, to whom, of course, I told the whole matter.

He, like me, was now fairly bewildered.

‘Peggy,” he said, ‘hadn't you better let the thing alone?’

‘Let it alone,’ I cried, ‘such cruel sorrow, such a flagrant wrong — Never.’

‘Well,’ kissing me, ‘perhaps you are right. Peg, my dear. Happy folk ought to help the miserable.’

I set to work. Woman's wit is keen, and I had my share of the quality.

We invited Dr Merchiston to our house; he came, at first rarely, then frequently. Of course Mrs Merchiston was always included in these invitations, and of course we received duly the formal apology. Gradually this ceased, and he came still. He must have known that she came too, on other days: often he found books and work of hers lying about my table; yet his visits ceased not. He seemed to like to come. He and my husband became staunch friends, but as for me, despite his courtesy, my heart remained angry and sore against him.

Yet I must confess that we found him all his wife fondly believed; a man of keen intellect, high principle, generous and tender heart. If I had not known what I did know, I should have avouched unhesitatingly that the world did not contain a nobler man than Dr Merchiston.

Excepting of course, my James.

For his manners, they were simple, natural kind; not in any way eccentric, or indicative of vice or folly. Among our neighbours his character rose to the highest pitch of estimation; and when at last the fatal truth was known (alas! what household misery can ever long be hid, especially in a country place), all sorts of excuses and apologies were made for him. And cruelly, mournfully — as it always falls on the weaker side — fell the lash of the world's tongue upon his wife.

But I — and one or two more who knew and loved her — stood boldly by Mrs Merchiston through fair report and foul. And I believe so great was the mingled awe and respect which the Doctor impressed upon all his acquaintance, that no portion of these calumnies against her reached her husband.

Three months slipped by without change, save that Mrs Merchiston's sad lot grew sadder still. Her few acquaintance dropped her; it was so ‘extremely inconvenient.’ One lady was on thorns whenever Mrs Merchiston called, lest Dr Merchiston should chance to call likewise; another tried every conceivable diplomacy to bring about their meeting; it would be ‘so very amusing.’ Gradually the unfortunate wife could not walk down our village without being

pointed at, or crossed aside from, till she rarely went out at all.

Dr Merchiston, too, was seldom seen, except by his immediate friends, none of whom dared breathe a word to him concerning his domestic affairs, save the simple inquiries of courtesy after Mrs Merchiston, to which he invariably answered in the customary form, as any other husband would answer. I think, in fact I know, that all this time he believed her to be living at peace; perfectly happy in her beautiful house, in our cheerful village, and in a small society of her own choosing, of which I was the chief. He once hinted as much to me, expressing his great pleasure that Mrs Merchiston and myself were fast friends.

I hardly know what possessed me that I did not then and there burst out upon him with a piece of my mind; any 'woman of spirit' — as James sometimes called me — would have done it. What was he but a man?

Ay, there was the difficulty. His perfect manliness disarmed one; that quiet dignity of reserve, which, I have noticed, while women are ready enough to complain of their husbands, keeps nine men out of ten from ever saying a word against their wives. Then, too, the silent deprecation of his sickly mien, and of the ineffable, cureless melancholy which, the moment he ceased conversation, arose in his dark eyes. What could a tender-hearted woman do?

Beginning by hating and despising, I often ended in pitying him, and every time I saw him all my determinations to attack him about his domestic wickedness vanished in air.

Besides — as James astutely observed — if a wife obstinately persists in blindly obeying her husband, never asking the why and the wherefore of his insane and incomprehensible will, and concealing from him that she is wasting away in slow misery, what business has a third party to accuse or even acquaint him of the fact?

Was no other plan to be tried? Yes; accidentally one was forced into my mind.

On a winter's afternoon, when I sat with my baby over our happy Christmas fire.

Mrs Merchiston came rushing in.

'Hide me — -anywhere; let nobody find me. Mrs Rivers, they hoot at me down the street. They say — oh, I dare not think what they say, and I dare not tell him.

Perhaps — oh, horror — perhaps he thinks so too.'

Long shudders possessed her; it was some time before she gained the slightest composure.

It was not difficult for me to guess the cause of her anguish.

‘Never mind wicked tongues, Mrs Merchiston, they will cease if let alone. Only live in peace and patience. Hope in God still.’

‘I can't,’ she said, with a wild look that I had not before seen. ‘How should I hope in Him ? He has forsaken me; why should I live any longer? Oh! save me, save me I Let me go away from here, from my husband. I must go, their cruel tongues will kill me.’

‘You shall,’ I cried, with a sudden idea, as suddenly converted into a resolution; ‘you shall, and I will help you.’

Whereupon I explained all to her; somewhat hastily, for I was afraid of Mr Rivers coming home; he who had just a man's notion of marital authority, and the wickedness of conjugal rebellion. But this was a case in which I set even him at defiance — or rather I trusted to my own influence to convince him that, acting from my conscience solely, I acted right.

Mark me, children, I would have a woman submit to any lawful authority, even unjustly and cruelly exercised, so long as the misery does not ruin her soul. When the torment goads her thus far — when like Job's wife, the Devil tempts her to ‘curse God and die,’ then, I hold, all duty ceases, except to her Maker, and herself, the creature which He made; let her save her own soul, and flee!

My counsel to Mrs Merchiston was this; at once — openly if she could, secretly if that was impossible — to leave her husband, absolutely and entirely, exacting no maintenance, making neither excuse nor accusation.

It necessarily- followed that she must earn her own bread; and she must immediately seek a position that would place her fair fame above suspicion, both now and at any future time.

This is how I planned it.

I had a sister, a well-jointured widow, with a large family. I proposed to place my poor

friend with her as a governess. Mrs Merchiston eagerly assented. She had been a teacher, she said, in her youth, so that the duty would be easy, and she could fulfil it well.

‘And oh!’ she cried, while the tears ran down her face, ‘I shall be in a household, a home, among children. Perhaps the little things will love me.’

Poor desolate soul!

I will not detail the many evening lectures that were required to bring my husband to my own way of thinking. For one thing he inexorably held out, and finally I agreed with him, that Dr Merchiston should be openly and honourably informed of his wife's intended departure.

She wrote to him herself, in our house. James and I both read the letter. It was as follows: —

‘Dear Husband,

‘Forgive my addressing you against your implied desire. Forgive my asking once more, and for the last time, what have I done to you? Why are you estranged from me? I can no longer sustain the life I lead. I desire to leave you. I am going to be a governess, as I was before we were married. Already all my plans are formed, but I could not part from you without this forewarning and farewell.

Your wife, Barbara.’

This — the last and most carefully, even coldly worded, of the many letters she wrote and tore up — was left, to avoid remarks, by my own servant at Dr Merchiston's door.

On the evening of that day Mrs Merchiston came to my house. She looked white and shivering, but not with the cold. Her poor blue eyes so warm and kind, had a frosty glitter in them that was strange and sad.

‘No answer,’ she kept repeating; ‘no answer — none. Now I must go.’

I replied that everything was ready; our gig would be at the door in a minute; it was a bright moonlight night, and I myself would accompany her to my sister's house.

'It is not far — not so very far Mrs Rivers? Not so far but that I can always hear of him, or — if he should be ill at any time — '

'You can go home at once.'

"Home!" she echoed piteously. Then, as if stung into one desperate effort, the last struggle of her tender and feeble nature, she sprang into the gig, I following her.

I was scarcely seated, reins in hand, for I was determined that no other than myself should have the credit of eloping with Mrs Merchiston, than I felt on my right arm a grasp like a vice.

'Mrs Rivers, whom have you there? Is it my wife?'

'Yes, Dr Merchiston,' I cried, not in the least frightened by the look and tone; 'yes, it is your wife. I am taking her where she will live in peace, and not be killed by inches any longer. Stand aside; let me drive on.'

'In one moment. Pardon me;' he passed in front of the horse to the other side.

"Barbara? Is that you, Barbara?"

No words could describe the ineffable tenderness, the longing anguish, of that voice.

No wonder that it made her grasp my arm, and cry wildly on me to stop.

'It is not ten minutes since I received your letter. Barbara, grant me one word in the presence of this lady, by whose advice you are leaving your husband.'

'By whose advice did you forsake your wife, Dr Merchiston?' I began, boldly; but by the carriage-lamp I caught sight of his face, and it seemed like that of a man literally dying — dying of despair.' Mrs Merchiston, suppose we re-enter my house for awhile. Doctor, will you lift your wife down? She has fainted.'

Soon the poor lady was sitting in my parlour, I by her side. Dr Merchiston stood opposite, watching us both. He was neither violent nor reproachful, but perfectly silent.

Nevertheless, I felt somewhat uncomfortable, and glad from my heart that James was safe ten miles off, and that I alone had been mixed up with this affair.

'She is better now, Mrs Rivers. I may speak?'

"Speak, sir."

'I will pass over my present trying position. Of course, I perceive — in fact, I was already aware — that Mrs Merchiston has acquainted you with our sad, inevitable estrangement.'

'Why inevitable? When there has been no quarrel on either side? When, cruel as you have been to her, she has never breathed a word to your discredit?' (He groaned.)

'When, as I understand, you have not the shadow of blame to urge against her?'

'Before heaven, none. Have I not declared this, and will I not declare it before all the world? She knows I will.'

'Then why, my dear sir, in the name of all that is good and honourable — nay, even in the name of common sense, why is your estrangement inevitable?'

He seemed to cower and shudder as before some inexpressible dread; once he glanced wildly round the room, as if with the vague idea of escaping. Finally, he forced himself to speak, with a smile that was most painful to witness.

'Mrs Rivers, even though a lady asks me, I cannot answer that question.'

'Can you if your wife herself asks it? I will leave you together.'

As I rose to go, Dr Merchiston interposed. The cold sweat stood on his brow; he looked — yes, I thought so at the moment — like a possessed man struggling with his inward demon.

'For God's sake, no! For the love of mercy, no! Stay by her; take care of her.

I will speak in your presence; I will not detain you long.'

'You had better not. See,' for the poor wife was again insensible. Dr Merchiston rushed to her side; he chafed her hands; he fell on his knees before her; but as she opened her eyes he crept away, and put the room's length between them.

'Now may I speak? You wished to leave me, Barbara. To go whither?'

I told him, concealing nothing; he seemed greatly shocked.

'Mrs Rivers,' he said at length, 'such a scheme is impossible. I will never consent to it. If she desires, she shall leave my house, for yours or any other. She shall have any luxuries she pleases; she shall be as free from me as if I were dead and she a widow. But

that my wife should quit the shelter of my roof to earn her daily bread — I never will allow it.’

From this decision there was no appeal. The wife evidently desired none; her eyes began to shine with joy, and even I took hope.

‘But, Dr Merchiston, can there be no change? You loved one another once. Love is not yet dead ; love never wholly dies, Surely—’

‘Madam, silence!’

Could it be his voice that spoke; his once calm, low voice? I was now really terrified.

He rose and walked about the room; we two sat trembling. At last he stopped in his old position, with his hand on the mantelpiece.

‘Mrs Rivers, my extremely painful position— you will acknowledge it is such — must excuse anything in me unbecoming, uncourteous.’

I assured him he had my free pardon for any excitement, and I hoped he felt calmer now.

‘Perfectly, perfectly; you must see that, do you not?’

‘I do,’ said I, with a sense of bitterness against the whole race of mankind, who can drive poor womankind almost out of their senses, while they themselves preserve the most sublime composure.

‘I will now, with your permission and in your presence, speak to my wife. Barbara’ — in a quiet equal tone, as if addressing an ordinary person — ‘I told you five years ago that it is not I who am inexorable, but fate, even if the life we then began to lead should last until my death. I repeat the same now. Yet, for these five years you have been at peace and safe. Safe,’ he repeated, with a slight pause, ‘under my roof, where I can shelter and protect you better than anywhere else.’

‘Protect her?’ And then I told him — how could I help it? — of the slights and outrages to which their manner of life had exposed her. How every idle tongue in the neighbourhood had wagged at her expense, and to both their dishonour. It was terrible to see the effect produced on him.

‘Hush; tell me no more, or — Barbara, forgive me; forgive me that I ever made you

my wife. There is but one atonement; shall I make you my widow!

‘Doctor Merchiston,’ I cried, catching his arm, ‘are you mad?’

He started, shuddered, and in a moment had recovered all his self-control.

‘Mrs Rivers, this is a state of things most terrible, of which I was totally ignorant. How is it to be remedied? — Granting, as you must grant, the one unalterable necessity?’

I thought a minute, and then proposed, to silence the tongue of all Apedale, that the husband and wife should openly walk to church together every Sunday, and kneel together in the house of God. And may He forgive me if in this scheme I had a deeper hope than I betrayed.

‘I will do it,’ said Dr Merchiston, after a pause. ‘Barbara, do you consent? Will you come home?’

‘I will.’

‘But to the old life? In nothing changed — for changed it cannot, must not be?’

‘Under any circumstances I will come home.’

‘Thank you; God bless you. It is better so.’

There was a quiet pause, broken only by one or two faint sobs from her. At last they ceased.

Dr Merchiston took his hat to depart; as he was going, his wife started up and caught him by the hand.

‘Husband, one word, and I can bear all things. Did — did you ever love me?’

‘Love you? Oh, my little Barbara!’

‘Do you love me?’

‘Yes,’ in a whisper, sharp with intolerable pain; ‘yes.’

‘Then I do not mind anything. Oh no, thank God! I do not mind.’

She burst into hysterical laughter, and threw herself into my arms. It was only my arms she could come to — her husband was gone.

She went home as she had promised, and the old life began once more. Without the slightest change, she told me — save that regularly on Sunday mornings he knocked at the door of communication between the double house, kept always locked on her side, by his desire —

that she found him waiting in the hall, and they walked arm-and-arm, as silently and sadly as mourners after a corpse, to the church door. In the same way returning, he immediately parted from her, and went his way to his own apartments.

Apedale was quite satisfied, and circulated innumerable explanations, which had probably as much truth in them as the former accusations.

Dr Merchiston came as usual to play chess with my husband, and no allusion was ever made to the night which had witnessed so strange a scene in our house.

Mrs Merchiston improved in health and cheerfulness. To a woman the simple conviction of being loved is support and strength through the most terrible ordeal. Once sure of that, her faith is infinite, her consolation complete. After his 'Yes,' poor little Barbara revived like a flower in the sun.

Not so her husband. Everybody noticed that Dr Merchiston was wasting away to a shadow. On Sundays especially, his countenance, always sallow and worn, seemed to me to have the ghastly look of one whom you know to be inwardly fighting a great soul battle. You feel at once the warfare will be won — but the man will die.

And still, as ever, of all the impenetrable mysteries that life can weave, that man and his secret were the darkest.

At least to me. Whether it was so to my husband, whose reserved habits and wide experience of human nature helped to make him what, thank heaven, he always was — much wiser than I — I do not know; but I often caught his grave penetrating eye intently fixed on Dr Merchiston. So much so, that more than once the Doctor recoiled from it uneasily. But Mr Rivers redoubled his kindness; in truth, I never knew James, who was very undemonstrative, and usually engrossed between interest in his patients and his domestic affections, attach himself so strongly to any male friend out of his own home, as he did to Dr Merchiston.

He seized every opportunity to allure our neighbour from his morbid, solitary in-doors life to a more wholesome existence. They rode out together on the medical rounds — James trying to interest him in the many, many opportunities of philanthropy with

which a country surgeon's life abounds. Sometimes — one day I especially remember — Dr Merchiston said he thought Mr Rivers had familiarized him with every possible aspect of human pain.

‘Not all — I have yet to show you — indeed, I thought of doing so this morning — the blackest aspect human suffering can show. And yet, like all suffering, a merciful God has not left it without means of alleviation.’

"What do you mean? I thought we were going to some hospital. For what disease?"

‘No physical disease. Yet one which I believe, like all other diseases, is capable of prevention and cure — mental insanity.’

Dr Merchiston grew as white as this my paper. He said, in a confused manner, which vainly tried to simulate indifference, — ‘You are right. But it is a painful subject, — insanity.’

I did not wonder that my husband tried to change the conversation, and his morning plan likewise. It was evident that in some way the topic strongly affected our friend. Probably he had had a relative thus afflicted.

It must be remembered that forty years ago the subject of insanity was viewed in a very different light from what it is at present. Instead of a mere disease, a mental instead of a bodily ailment — yet no less susceptible of remedy — it was looked upon as a visitation, a curse, almost a crime. Any family who owned a member thus suffering, hid the secret as if it had been absolute guilt. ‘Mad-house,’ ‘mad doctor,’ were words which people shuddered at, or dared not utter. And no wonder! For in many instances they revealed abysses of ignorance, cruelty, and wickedness, horrible to contemplate. Since then more than one modern Howard has gone among those worse than prisons, cleared away incalculable evils, and made even such dark places of the earth to see a hopeful dawn.

Throughout his professional career, one of my husband's favourite ‘crotchets,’ as I called them, had been the investigation of insanity.

Commencing with the simple doctrine, startling, but true, that every man and woman

is mad on some one point — that is, has a certain weak corner of the mind or brain, which requires carefully watching like any other weak portion of the body, lest it should become the seat of rampant disease, he went on with a theory of possible cure — one that would take a wiser head than mine to explain, but which effectually removed the intolerable horror, misery, and hopelessness of that great cloud over-hanging the civilised and intellectual portion of the world — mental insanity. I do not mean the raving madness which is generally super-induced by violent passions, and which by-gone ages used to regard as a sort of demoniacal possession — which it may be, for aught I know — but that general state of unsoundness, unhealthiness of brain, which corresponds to unhealthiness of body, and like it, often requires less a physician than a sanitary commissioner.

This may seem an unnecessary didactic interpolation, but I owe it to the natural course of my story, and as a tribute to my dear husband. Besides, it formed the subject of a conversation which, the question being voluntarily revived by Dr Merchiston, he and James held together during the whole afternoon.

It was good and pleasant to hear those two men talk. I listened, pleased as a woman who is contented to appreciate and enjoy that to which herself can never attain. And once more; for the thousandth time, I noted with admiration the wonderfully strong and lucid intellect with which Dr Merchiston could grasp any subject, handle it, view it on all points, and make his auditors see it too. Even on this matter, which still seemed to touch his sympathies deeply, especially when he alluded to the world's horror and cruel treatment of insane persons — insane perhaps only on some particular point, while the rest of the brain was clear and sound — even there his powers of reasoning and argument never failed.

‘Well’ said Mr Rivers, smiling, as they shook hands at the door, ‘I am glad to have found some one who can understand my hobby. You are certainly one of the clearest-headed men I ever knew.’

‘You truly think so? I thank you, Rivers,’ said the Doctor, earnestly, as he disappeared into the dark.

I remember this night's conversation vividly, because, in heaven's inscrutable mercy — ay, I

will write "mercy" — it was the last time Dr Merchiston entered our house.

The next morning he bowed to me at the window, riding past on his gaily curvetting horse, looking better and more cheerful than he had done for a long time.

That evening my husband was summoned to the Double House. Its master had been thrown from his horse, his leg and his right arm fractured. If all went well, James told me, and I had rarely seen him so moved — the patient would be confined to his bed, bound there hand and foot, helpless as a child, for three or four months. Poor Dr Merchiston!

'Is his wife with him?' was the first question I asked.

'Yes, thank God, yes!' cried James, fairly bursting into tears. I was so shocked, so amazed by his emotion, that I never inquired or learnt to this day how it came about, or what strange scene my husband had that evening witnessed in the Double House.

There was a long crisis, in which the balance wavered between life and death. Life triumphed.

I went almost every day; but it was long before I saw Mrs Merchiston; when I did, it was the strangest sight ! Her looks were full of the deepest peace, the most seraphic joy. And yet she had been for weeks a nurse in that sick room. A close, tender, indefatigable nurse, such as none but a wife can be; as fondly watchful — ay, and as gratefully and adoringly watched, my husband told me, by the sick man's dim eyes, as if she had been a wife bound for years in near, continual household bonds, instead of having lived totally estranged from him since the first six months of union.

But no one ever spoke or thought of that now.

Dr Merchiston slowly improved; though he was still totally helpless, and his weakness remained that of a very infant.

In this state he was when I was first admitted to his sick-chamber.

Mrs Merchiston sat at the window, sewing. The room was bright and pleasant; she had brought into it all those cheerfulnesses which can alleviate the long-to-be-endured suffering from which all danger is past. When I thought of the former aspect and atmosphere of the

house, it did not seem in the least sad now; for Barbara's eyes had a permanent, mild, satisfied light; and her husband's, which were ever dwelling on her face and form, were full of the calmest, most entire happiness.

I sat with them a good while, and did not marvel at his saying ere I left — ‘that he thoroughly enjoyed being ill.’

With what a solemn, sublime evenness is life meted out! Barbara has told me since that those five months following her husband's accident were the most truly happy her life had ever known.

‘Look at him,’ she whispered to me one evening when he lay by the window, half dozing, having been for the first time allowed a faint attempt at locomotion, though he was still obliged to be waited upon hand and foot — ‘Mrs Rivers, did you ever see so beautiful a smile? Yet it is nothing compared to that he wore when he was very, very ill, when I first began to nurse and tend him; and he did nothing but watch me about the room, and call me his Barbara. — I am here, Evan! — did you want me?’

She was at his side in a moment, smoothing his pillow, leaning over and caressing him. I think he was not aware of there being any one in the room but their two selves, for he fondled her curls and her soft cheeks.

‘My Barbara, we have had a little ray of comfort in our sad life. How happy we have been in this sick room!’

‘We have been, Evan?’

‘Ay; but nothing lasts in this world — nothing!’

‘Husband, that is like one of your morbid sayings when we were first married. But I will not have it now — I will not, indeed.’

And she closed his mouth with a pretty petulance. He lifted his hand to remove hers, then sunk back.

‘I am growing strong again; I can use my right arm. O Heaven! my right arm!’

I am not helpless any longer.’

‘No, thank God! But you speak as if you were shocked and terrified.’

'I am — I am. With strength comes — O my Barbara!'

His wife, alarmed at the anguish of his tone, called out my name. Dr Merchiston caught at it. 'Is Mrs Rivers there? Bid her come in; bid anybody come in. Ah! yes, that is well.'

After a pause, which seemed more of mental than physical exhaustion, he became himself again for the rest of the evening.

The next day he sent for me, and, in Mrs Merchiston's absence, talked with me a long while about her. He feared her health would give way; he wished her to be more with me; he hoped I would impress upon her that it made him miserable to see her spending all her days and nights in his sick room.

'What! In the only place in the world where she has real happiness?'

'Do you think so? Is she never happy but with me? Then Heaven forgive me!

Heaven have pity on me!' he groaned.

'Dr Merchiston, you surely do not intend to send your wife from you again — your forgiving, loving wife?'

Before he could answer she came in. I went away thoroughly angry and miserable.

That evening I indulged James with such a long harangue on the heartlessness of his sex, that, as I said, he must have been less a man than an angel to have borne it. When I told him the cause, he ceased all general arguments, sat a long time thoughtful, burning his hessians against the bars of the grate, finally sent me to bed, and did not himself follow until midnight.

Dr Merchiston's cure progressed; in the same ratio his wife's cheerfulness declined.

He grew day by day more melancholy, irritable, and cold. By the time he was released from his helpless condition the icy barrier between them had risen up again. She made no complaint, but the facts were evident.

My husband and I by his express desire spent almost every evening at the Double House. Very painful and dreary evenings they were. Convalescence seemed to the poor patient no happiness — only a terror, misery, and pain.

One night, just as we were leaving, making an attempt at cheerfulness — for it was the first time he had performed the feat of walking, and his wife had helped him across the room with triumphant joy — he said, breaking from a long reverie, ‘Stay! a few minutes more; Rivers — Mrs Rivers — I want to speak with you both.’

We sat down. He fell back in his chair, and covered his eyes. At length Mrs Merchiston gently took the hands away.

‘Evan, you don't feel so strong as usual tonight.’

‘I do; alas, alas, I do,’ he muttered.

‘Would I were weak, and lay on that bed again as powerless as a child. No, Barbara; look, I Am strong — well.’ He stood up, stretching his gaunt right arm, and clenching the hand; then let it drop, affrighted. ‘My little Barbara, I must send thee away.’

‘Send me away?’

‘Send her away?’

‘Peggy,’ cried my husband, in stern reproof, ‘be silent!’

The poor wife broke out into bitter sobs. ‘Oh, Evan, what have I done to you? Dear Evan, let me stay — only till you are well, quite well.’

For, despite what he said about his strength, his countenance, as he lay back, was almost that of a corpse. Barbara's clinging arms seemed to him worse than the gripe of a murderer.

‘Take her away, Mrs Rivers; take my poor wife away. You know how she has nursed me; you know whether I love her or not.’

‘Love her,’ I cried bitterly; but James's hand was upon my shoulder. His eye, which with its gentle firmness could, they said at the hospital, control the most refractory and soothe the most wretched patient, was fixed upon Dr Merchiston. I saw the sick man yield; the bright hectic flush came and went in his cheek.

‘Rivers, my good friend, what do you wish me to do?’

‘A very simple thing. Tell me — not these poor, frightened women — but me, your real reason for acting thus.’

‘Impossible.’

‘Not quite. It may be I partly guess it already.’

Dr Merchiston started up with the look of a hunted wild beast in its last despair, but my husband laid his hand on his, in a kind but resolute way.

‘Indeed, indeed, you are safe in telling me. Will you do it?’

The patient hesitated, held up his thin hand to the light with a wan smile, then said, ‘It cannot matter for long; I will tell you.’

James immediately sent us both out of the room.

Mrs Merchiston was a very weak woman, gentle and frail. She wept until her strength was gone; then I put her to bed in her maid's charge, and waited until Mr Rivers ended his conference with her husband.

It was two hours before James came out. At sight of him my torrent of curiosity was dried up; he looked as I had sometimes seen him, coming home from a death-bed. To my few questions he answered not a word.

‘But at least,’ said I, half crying, “at least you might tell me what I am to do with poor Mrs Merchiston.’

‘Yes, yes.’ He thought a minute. ‘She must go home with us; the sooner the better.’

‘You agree, then,’ I burst out, breathless; ‘you agree to this separation?’

‘Entirely.’

‘You join with her wicked husband in his ingratitude — his brutality—’

‘Peggy!’ James caught me by the shoulders, with the sternest frown that ever fell on me in all our peaceful married life; ‘Peggy, may heaven forgive you! You do not know what you are saying.’

I was completely awed.

‘Dr Merchiston has told you the secret, and you are determined to keep it?’

‘Implicitly, while his poor life lasts.’

My husband was a man of inviolable honour. He never would tell a patient's secrets, or a friend's, even to me, his wife; nor was I the woman to desire it. I urged no more.

During the ten days that Mrs Merchiston remained in my house, part of the time she was in a sort of low fever, which was the happiest thing for her poor soul. I made not a single inquiry after her husband; I knew that Mr Rivers was with him at all hours, as doctor, nurse, and friend.

One day, when Mrs Merchiston was sitting in the parlour with me, he looked in at the door. She did not see him. He quietly beckoned me out.

‘Well, James?’

‘Speak lower, Peggy, lower; don't let her hear.’

And then I saw how very much agitated he was; yet even that did not quite remove the bitterness with I could not help mentioning the name of Dr Merchiston,

‘Peggy, Dr Merchiston is dying.’

I had not expected this; it was a great shock.

‘I feared it would be so,’ continued James; ‘I have seen him sinking this long time. Now the mind is at peace, but the worn-out body — ‘

‘His wife — his poor wife,’ was all I could utter.

‘Yes, that is what I came to say. She must go to him; he wishes it much. Do you think she will?’

I smiled sadly. ‘Ah! James, she is a woman.’

‘And you women can forgive to all eternity, — Heaven bless you for it! Besides, she will know the whole truth soon.’

I asked not what this ‘truth’ was. What did it matter? He was dying.

‘But are you sure, James, there is no hope of his recovery?’

‘None, I believe — and am almost glad to believe it. There is no man I ever knew whom I so deeply pity, and shall so thankfully see gone to his last rest, as Dr Merchiston.’

These were strong words, enough to calm down every wrong feeling, and make me fit to lead the wife to her husband's sick — nay, death-chamber.

How we brought her thither I forget. I only remember the moment when we stood

within the door.

Dr Merchiston lay on his bed, as for five long months he had patiently and cheerfully lain. He had something of that old quiet look now, but with a change. The strange awful change which, however fond friends may deceive themselves, is always clearly visible to a colder gaze. You say at once, 'That man will die.'

When Barbara came into the room, he stretched out his arms with the brightest, happiest smile. She clung to him closely and long. There was no forgiveness asked or bestowed; it was not needed.

'I am so content, my Barbara, content at last!' and he laid his head on her shoulder.

'Evan, you will not part from me again?'

'No — I need not now. They will tell you why it was. You believe — you will always believe, how I loved you?'

'Yes.'

'Stoop. Let me hold her close as I used to do, — my wife, my little Barbara. Stoop down.'

She obeyed. He put his arms round her, and kissed her with many kisses, such as he had not given her since she was a six months' bride; their memory remained sweet on her lips till she was old and grey.

Dr Merchiston died at the next sunrise, died peacefully in Barbara's arms.

Three days after, my husband and I stood by the coffin, where for the last few minutes on earth the features which had been so familiar to us for the last two years were exposed to our view. James said, — touching the forehead, which was placid as a dead baby's, with all the wrinkles gone, —

'Thank the Lord!'

‘Why?’

‘For this blessed death, in which alone his sufferings could end. He was a monomaniac, and he knew it.’

Before speaking again, my husband reverently and tenderly closed the coffin, and led me downstairs.

The funeral over, and we two sitting quietly and solemnly by our own fireside, James told me the whole.

‘He was, as I said, a monomaniac. Mad on one point only, the rest of his mind being clear and sound.’

‘And that point was — ‘

‘The desire to murder his wife. He told me,’ pursued James, when my horror had a little subsided, ‘that it came upon him first in the very honeymoon — beginning with the sort of feeling that I have heard several people say that they had at the climax of happiness — the wish there and then to die — together. Afterwards, day and night, whenever they were alone, the temptation used to haunt him. A physician himself, he knew that it was a monomania; but he also knew that, if he confessed it, he, sane on all other points, would be treated as a madman, and that his wife, the only creature he loved, would look on him with horror for ever. There was but one course to save himself and her; he took it, and never swerved from it.’

‘But in his illness?’

‘Then, being perfectly helpless, he knew he could not harm her, and in great bodily weakness most monomanias usually subside. His left him entirely. When he grew stronger it returned. You know the rest. His life was one long torture. Peace be with him now.’

‘Amen,’ I said, and went to comfort the widow.

The terrible fact which Dr Merchiston had desired should be told her after his death, did not seem to affect Barbara so much as we feared. Love to her, as to many other women, was the beginning and end of all things — sufficient for life, and even in death

wholly undying.

'He loved me, he always loved me,' she kept saying, and her days of mourning became the dawn of a perennial joy.

She lived to be nearly as old as I am now, remaining one of those widows who are 'widows indeed,' for ever faithful to one love and one memory.

THE END.

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